STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator: ~~XXXXXXXXXXXXXXXXXXXX~~ ~~THELMA FORD SIMMONS~~ D. J. SIMMONS, et al

Address: 3815 McCART STREET, FORT WORTH, TEXAS 76110

Reason(s) for filing (Check proper box)

- [ ] New Well
- [ ] Recompletion
- [ ] Change in Ownership

Change in Transporter of:

- [ ] Oil
- [ ] Casinghead Gas
- [ ] Dry Gas
- [X] Condensate

Other (Please explain)

OCT 1 0 1984

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
SIMMONS ~~FC~~	1	~~BLANCO PICTURED CLIFFS~~	~~State~~, Federal or ~~Fee~~	SF080247A SF080000A COMMUNITIZED

Location

Unit Letter O : 1190 Feet From The SOUTH Line and 1850 Feet From The EAST

Line of Section 26 Township 29N Range 9W NMPM, SAN JUAN County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [ ] or Condensate [X]: GARY ENERGY CORPORATION

Address (Give address to which approved copy of this form is to be sent): P. O. BOX 489 BLOOMFIELD, N. M. 87413

Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [X]: EL PASO NATURAL GAS COMPANY

Address (Give address to which approved copy of this form is to be sent): P. O. box 1492, EL PASO, TEX. 79978

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	O	26	29N	9W	YES	FEBRUARY 1967

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: *Complete Parts IV and V on reverse side if necessary.*

V. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Thelma Ford Simmons
(Signature)

(Title)
OWNER-OPERATOR 10/2/84
(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 10 1984, 19

BY Frank T. Chavez

TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.