Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

I.

OIL CONSERVATION DIVISION
P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410 Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

									PI No.		
Raymond T. Duncan								30	-045-21	887	
ddress											
1777 S. Harrison St.,	PH-1,	Denver	, CO	80210		(D)					
ew Well		Change in	Тина	ar al		ध्र (Piease ex	фіат)				
scompletion	Oil		Dry Ge		Effect	lve 5/1	/89				
hange in Operator	Casinghee	_			Direct.	LVC 3/ I	, 0)				
change of operator give name 1 address of previous operator					<u> </u>						
DESCRIPTION OF WELL	AND LEA	ASE									
ess Name		Well No.	Pool Na	me, Includi	ng Pormation			1	f Lease		ease No.
North Hogback 6		11	S1:	<u>lckrock</u>	<u>Dakota</u>				Federal or	<u>14-20</u>	<u>-0603-10</u>
cation	-	ď			0 11	-	. ^		-	•	
Unit LetterM	• • • • • • • • • • • • • • • • • • • •	0	. Feet Pro		South Lin				et From The	Wes	Line Line
Section 6 Township	29N	<u> </u>	Range	16W	, N	MPM,	San	Juan			- County
L DESIGNATION OF TRAN	SPORTE	R OF O	IL ANI	D NATU	RAL GAS						
ime of Authorized Transporter of Oil	X	or Conden	sate							orm is to be se	
Meridian Oil Company										M 8749	
ame of Authorized Transporter of Casing	head Gas		or Dry (Gas	Address (Giv	e address to	which	approved	copy of this f	orm is to be se	nt)
well produces oil or liquids, e location of tanks.					Is gas actually connected? When				?		
his production is commingled with that f	rom any oth				ing order numi	er:					
. COMPLETION DATA		Oil Well	<u> </u>	les Well	New Well	Workover		Deepen	Dhua Baak	Same Res'v	Diff Res'v
Designate Type of Completion	- (X)	On wen		MP ALEIT	1 1454 4161	WOROVE	' i '	vechen i	Flug Dack	Same Kes v	i Pili Kes v
te Spudded	Date Comp	d. Ready to	Prod.		Total Depth				P.B.T.D.	*	<u> </u>
vations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay				Tubing Depth		
erforations									Depth Casing Shoe		
I CA SALVALIS									Depui Casin	ig Silve	
	T	UBING.	CASIN	IG AND	CEMENTI	NG RECC	RD				
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INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.