

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-104
Revised 10-01-78
Format 06-01-83
Page 1REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASOperator
Pioneer Production Corp.Address
P.O. Box 208, Farmington, NM 87499

Reason(s) for filing (Check proper box)

☐ New Well	Change in Transporter of:	☐ Dry Gas
☐ Recompletion	☐ Oil	☐ Condensate
☐ Change in Ownership	☐ Casinghead Gas	☒ Condensate

Other (Please explain)

Change of transporter
Effective 12-1-84If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Nye Com	Well No. 1E	Pool Name, including Formation Undesignated Chacra	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter <u>E</u> ; <u>1730</u> Feet From The <u>North</u> Line and <u>1090</u> Feet From The <u>West</u> Line of Section <u>32</u> Township <u>29N</u> Range <u>11W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)	
Giant Refinery, Inc.	P.O. Box 256, Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Co. (No Change)		
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 32
	Twp. 29N	Rge. 11W
	Is gas actually connected? <u>No</u>	

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.

VI. 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.

Jim L. Jacobs (Signature)
Geologist (Title)
(Date)

NOV 27 1984
OIL CON. DIV.
DIST. 3

OIL CONSERVATION DIVISION

APPROVED Frank T. [Signature] 19 84
BY [Signature]
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 deepen well, this form must be accompanied by a tabulation of the deviated 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 credit.

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