. 14 knowledge and belief.

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May 29, 1985

Jacobs

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STATE OF NEW MEXICO			•			
THEREY AND MINERALS DEPARTMENT	•	•	•		Form C-104	
**, 60 (40:10) 110:1440					Revised 10-01-1 Formst 05-01-8	
DISTRIBUTION	OIL CONSE	RVATION	NOISIVIC		Page 1	~ ·
FILE	P. 1	O. BOX 2088				•
0.1,0.1	SANTA FE,	NEW MEXIC	O 87501	•		
1/40 0//KE				BE	ORIM	同同
TRANSPORTER OIL	D F OU C	· ·* con 11 towt		ID) E	GEIV	5
GPERATOR	REQUES	T FOR ALLOWA AN D	BLE .			ن ا
TROBATION OFFICE	AUTHORIZATION TO T		AND NATURAL	.GAS M	AY 31 1985	ົ້ ເ
I.	AUTHORIZATION TO TE	it A (SI OK I OK	7410 117101716	. 57.5	/// / 1	
Obetatot				Cli	CON. D	IV.
Dugan Production Co	r p.				F 72171	· .
. Address .					Dion.	
P.O. Box 208, Farmi	ngton, NM 8749 9				·	
Reason(s) for filing (Check proper box)			Other (Please exp	lain)		
New Well	Change in Transporter of:	_				
Recompletion	X ou	Dry Gas	Effective	e June 1, 198	3 5	2.
Cleange in Ownership	Caxinghead Gas	Condensate			·	
If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL AND I	EASE					
Lease Name	Well No. Pool Name, Inch	ding Fermation		d of Lease		Ledse
Pittam Pond	3 Cha Cha (Gallup	Sto	te, Federal or Fee	Fed.	<u>NM 107</u>
Location	,	•				
Unit Letter B : 500	Feet From The Nort	h_Line and20	<u>00 </u>	eet From The E	ast	
	0.014	7511		Can luan		Con
Line of Section Towns	hip 29N Rand	9• 15W	, NMPM,	San Juan		
	OWNER OF OUR AND MAR	TIDAL CAS				
III. DESIGNATION OF TRANSPOR	or Condensate	L Address (C	ive address to w	hich approved copy	of this form is to	obe sent)
1		1 .		armington, N		
Mancos Corp. Name of Authorized Transporter of Costing	head Gos (V) or Dry Gos (ive address to w	hich approved copy	of this form is to	o be sent)
• •				•	• .	
Libra Energies Inc.	(No Change)	lge. Is gas acti	ually connected?	When		
If well produces oil or liquide, give location of tanks.	B 11 29N	15W No_	.*	ì		
	<u></u>		i alian adae au			
If this production is commingled with t	hat from any other lease or	r pool, give comm:	ingiing older nu	noci.		
NOTE: Complete Parts IV and V o	n reverse side if necessary	<i>)</i> .		: .		
VI. CERTIFICATE OF COMPLIANCE	E	li li	OIL CON	SERVATION D	IVISION .	
I hereby certify that the rules and regulations	of the Oil Conservation Division	n have APPRO	VED C	MAY	31 1985)19
been complied with and that the information g	iven is true and complete to the	best of		8-17	7 7 100	, ,

Legse No. NM 10758

County

APPROVED	MAY 30 198519
BY	Smark Joseph
TITLE	SUPERVISOR DISTRICT

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

If this is a request for allowable for a newly drilled or deepen well, this form must be accompenied by a tabulation of the deviation taken on the well in accordance with nung 111.

All rections of this form must be filled out completely for allo eble on new and recompleted wells.

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

Seprente Forms C-104 sout be filed for each pool in multip completed wells.