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

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

DISTRICT III
1000 Rio Grande St., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator DenverAmerican Petroleum Limited Partnership	Well A/R No. 26679 30-045-09374
Address 410 17th Street, Suite 1600, Denver, CO 80202	
Reason(s) for Filing (Check proper box) New Well ☐ Change in Transporter of: Recompletion ☐ Oil ☐ Dry Gas ☐ Change in Operator ☒ Casingshead Gas ☐ Condensate ☐ General Atlantic Resources, Inc.	
If change of operator give name and address of previous operator 410 17th Street, Suite 1400, Denver, CO 80202	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Miller Gas Com 14402	Well No. 1	Pool Name, Jacking Formation Basin Dakota 71599	Kind of Lease State, Federal or Foreign ☒	Lease No. 38485
Location Unit Letter <u>H</u> : <u>1710</u> Feet From The <u>N</u> Line and <u>1150</u> Feet From The <u>E</u> Line Section <u>20</u> Township <u>30N</u> Range <u>13W</u> <u>NMCPM</u> San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Giant Oil Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499
Name of Authorized Transporter of Casingshead Gas ☐ or Dry Gas ☒ Sunterra Gas Gathering Company	Address (Give address to which approved copy of this form is to be sent) Alvarado Square Albuquerque, NM 87158-2610
If well produces oil or liquids, give location of tanks Unit <u>H</u> Sec. <u>20</u> Twp. <u>30N</u> Rge. <u>13W</u> Is gas actually connected? <u>Y</u> When? <u>7/81</u>	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Saddle Rel'v	Diff Rel'v
Date Spudded	Date Complet. Ready to Prod.		Total Depth		P.S.T.D.			
Electrodes (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Particulars					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Gas-MCF
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pump, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Signature
John L. Schmidt
John L. Schmidt, Pres. Denap, Inc. G.P.
Filing Date
6/2/93
Date
(303) 534-2551
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 21 1993

By [Signature]
Title SUPERVISOR DISTRICT 13

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.