

NO. OF WELLS DRILLED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.A.		
LAND OFFICE		
TRANSPORTER	OIL	
	NATURAL GAS	
OPERATOR		
FORMATION OFFICE		

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 Chase Energy, Inc.	
Address c/o Allen Consulting, Inc., 2501 E. 20th, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
☐ New Well ☐ Recombination ☐ Change in Ownership	Change in Transporter of: ☒ Oil ☐ Gas ☐ Condensate

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo Tribal	Well No. 13	Pool Name, including Formation Slickrock Dakota	Kind of Lease Navajo	Lease No. 14-20-0603-742
Location Unit Letter <u>L</u> : 2475 Feet From The <u>South</u> Line and 1153 Feet From The <u>West</u> Line of Section 31 Township 30N Range 16W N.M.P.M., San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) 606 Hwy 64, Farmington N. M. 87401
Name of Authorized Transporter of Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	L 31 30N 16W

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

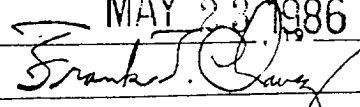
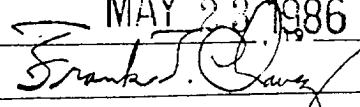
NOTE: Complete Parts IV and V on reverse side if necessary.

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.


(Signature)
Secretary/Treasurer
5/23/86
(Date)

OIL CONSERVATION DIVISION

APPROVED 
BY 
SUPERVISOR DISTRICT 2

TITLE _____
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 multiple completed wells.