

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES REQUIRED	
DISTRIBUTION	
SANTA FE	
FILE	
MAIL	
LAND OFFICE	
TRANSPORTER	☐ OIL ☐ GAS
OPERATOR	
REGISTRATION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2038
SANTA FE, NEW MEXICO 87501

RECEIVED
NOV 22 1985
OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. OPERATOR
Columbus Energy Corporation (Formerly Consolidated Oil & Gas, Inc.)
ADDRESS
P.O. Box 2038, Farmington, New Mexico 87499
REASON(S) for filing (Check proper box)
☐ New Well ☐ Change in Transporter etc ☐ Dry Gas
☐ Reopening Well ☐ Oil ☐ Condensate
☐ Change in Ownership ☐ Commingled Gas
Other (Please explain)
CHANGE OF COMPANY NAME

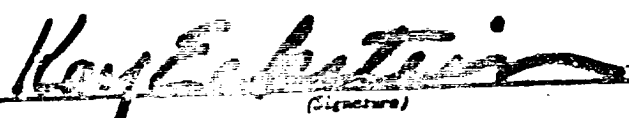
If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE
Lease Name DUKE 1 **Well No.** **Pool Name, including Formation** Blanco Mesaverde **Kind of Lease** Federal
Location H 1850 North 1180 East
Unit Letter **Foot From The** **Line and** **Foot From The**
Line of Section 13 **Township** 31N **Range** 13W **N.M.P.M.** San Juan **County**

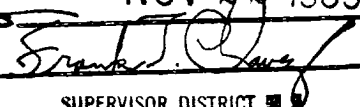
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorizing Transporter of Oil ☐ or **Condensate** ☐ **Address (Give address to which approved copy of this form is to be sent)**
Giant Refining Company P.O. Box 256, Farmington, NM 87499
Name of Authorizing Transporter of Commingled Gas ☐ or **Dry Gas** ☒ **Address (Give address to which approved copy of this form is to be sent)**
Southern Union Gathering Company P.O. Box 1899, Bloomfield, NM 87413
If well produces oil or liquids, give location of tanks. **Unit** **Sec.** **Twp.** **Range** **Is gas actually connected?** **When**
H 13 31N 13W Yes

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

NOTE: Complete Form 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)
Engineering Technician
(Title)
10/21/85
(Date)

OIL CONSERVATION DIVISION
NOV 28 1985
APPROVES _____, 19____
BY 
TITLE SUPERVISOR DISTRICT # _____
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 filled for each pool in multiply completed wells.

