

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
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OPERATOR	
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format C-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
OCT 28 1991

Operator ENERDYNE CORPORATION		OIL CON. DIV. DIST. 3
Address Post Office Box 502, Albuquerque, N.M. 87103		
Reason(s) for filing (Check proper box)		Other (Please explain)
☐ New Well	Change in Transporter oil	<i>Oper. Change only</i>
☐ Recompletion	☐ Oil ☐ Dry Gas	
☒ Change in Ownership	☐ Castinhood Gas ☐ Condensate	

If change of ownership give name and address of previous owner BRANA CORP., 320 Gold Ave. S.W., #1223. Albuquerque, NM 87102

II. DESCRIPTION OF WELL AND LEASE

Lease No.	State	Well No.	Pool Name, including Formation	Kind of Lease	State	Lease No.
		32	Chaco Wash- MV	State, Federal or Fee		LG2779
Location						
Unit Later <u>A</u> : <u>990</u> Feet From The <u>North</u> Line and <u>300</u> Feet From The <u>East</u>						
Line of Section <u>28</u> Township <u>20 North</u> Range <u>9 West</u> N.M.P.M. McKinley 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)
<u>GAEM Energy Corporation</u>	<u>Box 159, Bloomfield, NM 87413</u>
Name of Authorized Transporter of Castinhood Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
<u>NA</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>A</u> Sec. <u>28</u> Twp. <u>20N</u> Rge. <u>9W</u> Is gas actually connected? <u>N/A</u> when

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.

Don L. Hanosh
(Signature)
DON L. HANOSH, PRESIDENT
(Title)
10/25/91
(Date)

OIL CONSERVATION DIVISION
OCT 28 1991

APPROVED _____, 19____
BY *John D. [Signature]*
TITLE SUPERVISOR DISTRICT 10

This form is to be filled 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.