

STATE OF NEW MEXICO
OIL AND MINERALS DEPARTMENT

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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

Name of Operator Herrion Oil & Gas Corporation	
Address P. O. Box 840, Farmington, New Mexico 87499	
Reason(s) for filing (Check proper box)	
<input type="checkbox"/> New Well	<input type="checkbox"/> Change in Transporter of:
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil <input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate
Other (Please explain)	

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OIL CON. DIV. 1
DIST. 3

Change of ownership give name
address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name Rita Com	Well No. 4	Pool Name, including Formation Counselors Gallup/Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. 9F 078359
Location				
Unit Letter F	1880	Feet From The North	Line and 1730	Feet From The West
Line of Section 8	Township 23N	Range 6W	NMPM, Rio Arriba	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS


Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Hincos Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1320, Farmington, New Mexico 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Well produces oil or liquids, or location of tanks.	Unit F	Sec. 8	Twp. 23N	Rge. 6W	Is gas actually connected? No	When As soon as possible

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

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

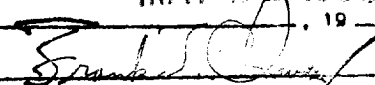
CERTIFICATE OF COMPLIANCE

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)
David E. Dunn, Operations Manager
(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED  MAY 21 1985
BY
TITLE SUPERVISOR DISTRICT # 3

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 multiply completed wells.