STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

DISTRIBUTE	O M		
SANTA FE		Ţ -	
PILE			
U.1.G.A.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			

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

Revised 10-01-78
Format 06-01-83

AUL 2 2 10.96

Form C-104

REQUEST FOR ALLOWABLE AND

OIL CON. DIV.

PRORATION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS DIST. 3								
Description									
DUGAN PRODUC	TION COL	<u>RP.</u>							
Address			•						
P O Box 208, Fa	armington,	NM 8	37499						
Reason(s) for filing (Check proper box)					Other (Please	explain)			
New Well	Change in Tr	ansparter a	" <u> </u>		۵.			_	
Recompletion	OII Dry Gas Change in Operator								
X Change in Ownership	Casingh	rad Gas	c	onden±ate	eff	ective	9-4-85		
					<u> </u>				
If change of ownership give name		C-1- I	2 0 0	201 101	Esemine	aton 1	NM 97/199		
and address of previous owner	Jack A.	Cole, I	<u>- U. I</u>	30X 19	. Farming	الم الكالي	<u>VM 87499</u>		
II. DESCRIPTION OF WELL AND	LEASE		-1 -1 5			Kind of L	e030		Lease No.
Lease Name	Well No. Pool Name, Including Formation							1	
Penistaja Wash	26-16 L	Jndes.	Gallu	<u> </u>		State, Fe	deral or Fee Fe	ederal	<u>NM 14729</u>
Location									
Unit Letter P : 970) Feet From T	Sot	ith լր	ne and 9	70	_ Feet Fr	The East	<u>t</u>	
Unit Letter									
Line of Section 26 Towns	hip 21N	Я	lange	4W	, NMPM	, San	doval		County
Line of Section 20 Towns									
	orra or off	A NITO NI	A TT ID A	CAS			•		
III. DESIGNATION OF TRANSPO	RIER OF OU	ensate	AIURA.	L CAS	(Give address	o which a	pproved copy of	this form is t	o be sent)
Name of Authorized Transporter of Oil	J of Cond	evadra —		"34.442	, 2				
				<u> </u>			pproved copy of	this form is t	o be senti
Name of Authorized Transporter of Casing	head Cas 🔲	or Dry Ga	-	Address	(Give address	io waich a	ppioned copy of	,	
				1					
	nii Sec.	Twp.	Rge.	ls gas ac	tually connect	ed?	When		
If well produces oil or liquids, give location of tanks.	I	i					1		
		. 1		. !					
If this production is commingled with	that from any	ther lease	or pool,	give com	mingling order	r 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.

An 1	Seul
Jim/L. Jacobs Geologist	(Signature)
	(Title)
7-21-86	
	(Date)

OIL CC	NSERV	'ATION	DIV	ISION
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APPROVED	22,1986
	Snamp. Javes
BY	
TITLE	SUPERVISOR VISTRICT 報 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or despensed 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.