	f
STATE OF NEW MEXICO	1
NERGY AND MINERALS DEPAR	TMENT -
	·
DISTRIBUTION	OIL CONSERVATION DIVISION
TANTA FE	
rile	P. O. BOX 2088
U.S.O.S.	SANTA FE, NEW MEXICO 87501
LANDOFFICE	
TOANIPORTED OIL	
GAS	REQUEST FOR ALLOWABLE
OPERATOR	ОИА
HE CHATION CPPICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
_	
Cairtor	
DUGAN PROF	OUCTION CORP.
Address	li li
** * *	f_{r}^{00} Tamington NM 07400
	08, Farmington, NM 87499
Recson(s) for filing (Check prop	or box) Other (Please explain)
New Well	Change in Transporter of:
Recompletion	On Dry Gas hooked Up.
•	Caringhead Gas Condensate
Cleange in Ownership	
change of ownership give n nd address of previous owner	ine
nd address of previous owner	
* THE COUNTY OF WILL	CONDICTOR
I. DESCRIPTION OF WELL	Well No. Pool Name, Including Extraction Kind of Lea
Lease Name	
Wit's End	4 Undesignated Gallup State, Feder
Location	
M	660 Feet From The South Line and 660 Feet From
Unit Letter:_	

State

West

LH-189**6**

Form C-104 Revised 10-01-78 Format 05-01-83 Page 1

If this production is commingled with that from any other lease or pool, give commingling order numbers NOTE: Complete Parts IV and V on reverse side if necessary.

or Condensate

Twp.

23N

23N

(No Change)

VI. CERTIFICATE OF COMPLIANCE

None of Authorized Transporter of CII

If well produces oil or liquids, give location of tanks.

The Mancos Corp.

Name of Authorized Transporter of Costnahead Gas V

Dugan Production Corp

Line of Section

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.

Township

HL DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Jim L Jacobs (Title)

6-28-85

(Dete)

OIL CONSERVATION DIVISION

6-13-8**5**

San Juan

Address (Give uddress to which approved copy of this form is to be sent)

Address (Cive address to which approved copy of this form is to be sent)

P.O. Box 208, Farmington, NM 87499

NMPM.

UIL	COMPETANTOM DIVIDION
APPROVED	7 7 1385
B♥	Stand Lave
	SUPERVISOR DELICITY BY S
TITLE	

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

If this is a request for allowable for a newly drilled or despens well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with NULE 111.

All sections of this form must be filled out completely for allow sble on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of come well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multip

completed wells.

10W

Rga.