S	TATE	OF	NEW	MEXIC	0
NERGY	1 ONA	NIN	ERALS	DEPAR	TMENT

DISTRIBUTION				
SANTA FE				
rill				
u,s.a. s.				
LAND OFFICE				
THANSPORTER	OIL			
I Washington and	GAS			
PERATOR				
PACAATION OFFICE				

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

Form C-104 Revised 10-01-78 Formal 06-01-83

Separate Forms C-104 must be filed for each pool in m

REQUEST FOR ALLOWABLE AND

AUTHORIZATION	TO TRANSPOR	RT OIL AND NATI	JRAL GAS		
I					
C;-eratof			The state of the s	and the second	
Dugan Production Corp.			· · · · · · · · · · · · · · · · · · ·		
Addi+#8					
P.O. Box 208, Farmington, NM 8749	19				
Reason(s) for tiling (Check proper box)	Other (Plea.	se explain)			
New Well Change in Transports	or of:				
Recompletion Oil	Dry G	Effective 8-1-85			
Change in Ownership Casinghead Gas	Cond	ensat e	•		
If change of ownership give name Amax Petroleum	Corporatio	n	•		
and address of previous owner P.O. Box 42806			·		
				_	
II. DESCRIPTION OF WELL AND LEASE Legan Name Well No. Pool Name	, Including Form	ation	Kind of Lease .	Leone	
	Blanco Pict	tured Cliffs	State, Federal or Fee Fee	1	
	Branco 7 10	carea ortito			
Location 700 N	orth	790	For From The West		
Unit Letter D : 790 Feet From The N	CI CII LIN+ o	ind - 750	Feet From The West		
26 Township 25N	Range 31	W , NMF	м. Rio Arriba	Co	
Line of Section 26 Township 25N	Range 31	n , , , , , , , , , , , , , , , , , , ,			
	>1.00T TO 1.1. C				
III. DESIGNATION OF TRANSPORTER OF OIL AND		indiana (Give addres	s to which approved copy of this form i	is to be sent)	
Name of Authorized Transporter of Oil or Condensate		,			
16-17	Car Ca	ndoress (Cive addres	s to which approved copy of this form	is to be sent	
Name of Authorized Transporter of Costinghead Gas or Dry	Cus (20)		The second secon		
El Paso Natural Gas Company		P.O. Box 4991	O. Farmington, NM 87499	<u> </u>	
If well produces oil or liquids, Unit Sec. Twp	Rge. 1			• •	
give location of tanks.		Yes	2/10/60		
If this production is commingled with that from any other le	are or pool, gi	ve commingling or	der number:		
•			•		
NOTE: Complete Parts IV and V on reverse side if new	essary.				
CERTIFICATE OF COMPLIANCE		OIL	CONSERVATION DIVISION	_	
VI. CERTIFICATE OF COMPLIANCE			SEP 0.6 198	չ 5	
I hereby certify that the rules and regulations of the Oil Conservation	Division have	APPROVED		, 19	
been complied with and that the information given is true and complete	to the best of		Sa 1 ((1)		
my knowledge and belief.		BY	SUDE DIVISION AND AND AND AND AND AND AND AND AND AN		
		TITLE	SUPERVISOR DISTRICT #	<u> </u>	
) [[[[[[[[[[[[[[[[[[[
Mamarill William -]]		to be filed in compliance with MI		
Janas 4. Wayou		If this is a r	equest for allowable for a newly dust be accompanied by a tabulation	rilled or cee	
Thomas A. Dugan (Signature)	H	well, this form m	e well in accordance with MULE	111.	
Presiden t			of this form must be filled out con		
(Title)	11	able on new and	recompleted wells.	-	
9-5-85		Fill out only	Sections I, II, III, and VI for c	thanges of	
(Date)	11	well name of num	ber, or transporter, or other such ch	ange of con	