

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

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STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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FILE		1	
U.B.G.B.			
LAND OFFICE		1-	
TRANSPORTER	OIL		
	DAS		
OPERATOR .			
PROBATION OFFICE			

OIL CONSERVATION DIVISION

P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRA	RANSPORT OIL AND NATURAL GAS		
Operator			
Graham Royalty Ltd.			
Address			
1675 Larimer St., Ste. 400, Denver, CO	80202		
Resson(s) for filing (Check proper box)	Other (Picase explain)		
New Well Change in Transporter of:			
Recompletion OII	Dry Gas		
X Change in Ownership Casinghead Gas	Condensate		
If Change of awarrahin give name DIID DEWDOL BID! (AWED-C			
and address of previous owner BHF FEIROLEUM (AMERICA	AS) INC. 1560 Broadway, Ste. 1900, Denver, CO 8020		
II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Includir			
Ti in the second	Lease No.		
Location 2 British Ga.	llup Dakota West State, Federal or Fee Indian Jic Tr 35		
	June 201 990 Feet Feet West		
Unit Letter M 990 Feet From The South Line and 990 Feet From The West			
Line of Section 36 Township 25N Range	5W , NMPM. Rio Arriba County		
	County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATUR	RALGAS		
Name of Authorized Transporter of Oil or Condensate	Addiosa (Give address to which approved copy of this form is to be sent)		
Ciniza Pipeline Company	P. O. Box 1887, Farmington, NM 87413		
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Co.	P. O. Box 990, Farmington, NM 87401		
If well produces oil or liquids, Unit , Sec. Twp. Rgs.	Is gas actually connected? , when		
give location of lanks. L 35 25N 5W	Yes		
If this production is commingled with that from any other lease or po-	ol, give commingling order number:		
NOTE: Complete Parts IV and V on reverse side if necessary.			
	H		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
I hereby certify that the rules and regulations of the Oil Conservation Division ha	APPROVED JAN 09 1989		
been complied with and that the information given is true and complete to the best	of APPROVED JAN 03 1905 19		
my knowledge and belief	BY		
	TITLE		
	SUPERVISION DISTRICT # 3		
This form is to be filed in compliance with AUL			
(Signoture)	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.		
in ha lac	All sections of this form must be filled out completely for allowable on new and recompleted wells.		
(Date)	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.		