(Date)

5	TATE	OF	NEW	MEXICO
Yag	eum A	AtM!	FRAIS	DEPARTMENT

DISTRIBUTION			
EANTA PE			
FILE			
U.S.a.S.			
LASO OFFICE			
TRANSPORTER	OIL,		
, AAAIPONIER	GAS		
OPERATOR			

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

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

Separate Forms C-104 must be filed for each pool in multiply completed wells.

0.2.0.2					
LAND OFFICE	•				
TRANSPORTER GAS	REQUEST FOR ALLOWABLE				
OPERATOR	AN		241 245	•	
1 OTATION OFFICE	AUTHORIZATION TO TRANSPO	ORT OIL AND NATU	KAL GAS		
ر ما در مصور ما در مصورتهای و مصورتهای از این	and the second s	programme of the Company of the Comp	and the second of the second of		
C; totot					3
J. Felix Hickman					
Address					
P.O. Box 208 Farmi	ngton, NM 87499				
Recoon(s) for liling (Check proper box)		Other (Pleas	e explain)		
Hew Well	Change in Transporter of:	(- ( ( - + -	E /1 /0E		
Recompletion	∑ OII ☐ DīY	Gas ETTECLI	ve 5/1/8 <b>5</b>	. •	
Change in Ownership	Casinghead Gas Cor	ndensate			
If change of ownership give name					
and address of previous owner					
II. DESCRIPTION OF WELL AND	TEASE	•			
Lease Name	Well No. Pool Name, Including Fo	rmation	Kind of Lease	Federal	Lease No.
Clark	9 Lindrith Gallur	p-Dakota West	State, Federal or Fee	<u>NM</u>	03011
Location				•	
	Teet From The South Line	and 430	Feet From The	West	
Unit Letter M: 331	Feet From the South Cine				
· .	thip 24 North Range	3 West NMP	M. Rio Arri	ha	County
Line of Section 5 Towns	AIP 24 NULLI	J_11(-)_L	-		
and the second second second	PATER OF OH AND MATIRAL	GAS			
III. DESIGNATION OF TRANSPO	or Condensate	Address (Give address	to which approved copy	of this form is	to be sent)
Norm of Authorized Transporter of Cil	<del>^</del>	D 0 Box 25	5 Farmington	. NM 8749	9
Giant Refining Comp	any chead Gas (V) or Dry Gas (	Address (Give address	to which approved copy	of this form is	to be sent)
Name of Authorized Transporter of Casin	<del>**</del>	P.O. Box 49			
El Paso Natural Gas		Is gas actually connec			
If well produces oil or liquids,	3111	Yes		for First	nel
give location of tanks.	M ; 5 ; 24N ; 3W				
If this production is commingled with	that from any other lease or pool,	give commingling ord	er number:		<del></del>
NOTE: Complete Parts IV and V	on leverse sine if necessary.	11	CONCEDIATION	DU UCIONI	
VI. CERTIFICATE OF COMPLIAN	CE.	UIL	CONSERVATION	DIVISION	
		<b> </b>  -	APR 2	< 198 <b>5</b>	. 19
I hereby certify that the rules and regulation	is of the Oil Conservation Division have	APPROVED	——————————————————————————————————————	<del></del>	
been complied with and that the information	given is true and complete to the best of	BY	Original Signed by FRAS	VK I. THAVEZ	
my knowledge and belief.				_	
•	•	TITLE	SUPERVISOR DIS	RICT # 5	
		774 a (2000 le	to be filed in compil	ance with RU	LE 1104.
1 2 /2	Jim L. Jacobs	11 24 45 10 10 0 2	sound for allowable (	or a newly dr	illed or deepense
		Il minist this form in	ist he accompanied b	y a tabulation	Of the design.
Geologist (Signatu	v = /	tests taken on th	e wall in accordance	WITH MULE	111.
,	. 1	All sections	of this form must be i	illed out com	plately for allow
4/23/85		II seed and only	recomplated wells.  Sections I. II. III.	and VI for c'	hanges of owner
4/23/03	1	well name or num	Sections 1, 11, 111, ber, or transporter, or c	ther such chi	inge of condition