

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

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

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
JUN - 8 1987
OIL CON. DIV.
DIST. 3

I. Operator
Sun. Exploration & Production Company

Address
P.O. Box 5940 T.A., Denver, CO 80217

Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☒ Change in Ownership
☐ Change in Transporter of:
☒ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
 Other (Please explain)
 4-1-87

If change of ownership give name and address of previous owner
Jerome McHugh, 650 S. Cherry St., Denver, CO 80222

II. DESCRIPTION OF WELL AND LEASE

Lease Name Wright Way	Well No. 1	Pool Name, including Formation Gavilan Mancos	Kind of Lease State, Federal or Fee	Lease No. 23032
Location Unit Letter C : 950 Feet From The north Line and -1680 Feet From The west Line of Section 2 Township 24N Range 2W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

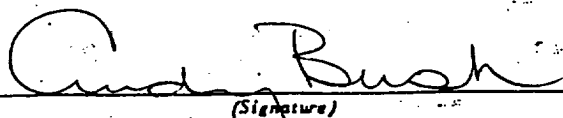
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipeline Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887, Bloomfield, NM
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) P.O. Box 990 Farmington, NM
If well produces oil or liquids, give location of tanks. Unit C Sec. 2 Twp. 24N Rge. 2W	Is gas actually connected? When

If this production is commingled with that from any other lease or pool, give commingling order number: R-7367

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.



Pror. & Prod. Acctg. Supvr.

6/2/87

(Date)

OIL CONSERVATION DIVISION

JUN - 8 1987

APPROVED _____, 19

BY 

TITLE SUPERVISION DISTRICT # 3

This form is to be filed in compliance with RULE 1104.
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.
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 filed for each pool in multiply completed wells.

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ENERGY AND MINERALS DEPARTMENT

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

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

RECEIVED
JUN - 8 - 1987
OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Sun Exploration & Production Company

Address P.O. Box 5940 T.A., Denver, CO 80217

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input checked="" type="checkbox"/> Dry Gas	Other (Please explain) 4-1-87
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate		
<input checked="" type="checkbox"/> Change in Ownership				

If change of ownership give name and address of previous owner Jerome McHugh, 650 S. Cherry St., Denver, CO 80217

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Wright Way</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Gavilan Dakota</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No. <u>23032</u>
Location				
Unit Letter <u>C</u> : <u>950</u> Feet From The <u>north</u> Line and <u>1680</u> Feet From The <u>west</u>				
Line of Section <u>2</u> Township <u>24N</u> Range <u>2W</u> , NMPM, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

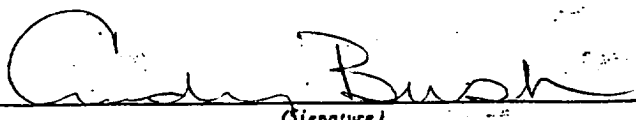
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <u>Giniza Pipeline Inc.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 256, Farmington, NM 87499</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>El Paso Natural Gas</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 990 Farmington, NM</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>C</u> Sec. <u>2</u> Twp. <u>24N</u> Rge. <u>2W</u>	

If this production is commingled with that from any other lease or pool, give commingling order 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.



Pror. & Prod. Acctg. Supvr.

6-2-87 (Date)

(Signature)

OIL CONSERVATION DIVISION

APPROVED June 8 1987 19
BY Supervisor
TITLE SUPERVISION DISTRICT # 3

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