

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	

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 and Production Company

Address P O Box 5940 TA Denver Colo 80217

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input checked="" type="checkbox"/> Casinghead Gas	

Other (Please explain) 4-1-87

If change of ownership give name and address of previous owner Jerome McHugh 650 s Cherry Street Denver Colo 80222

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No
<u>Beeks Babbit</u>	<u>1</u>	<u>Gavilan Mancos</u>	<u>State, Federal or Fee Fee</u>	

Location

Unit Letter G : 1650 Feet From The North Line and 1650 Feet From The East

Line of Section 7 Township 25N Range 2W , NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Ciniza Pipeline Inc</u>	<u>PO Box 1887 Bloomfield, NM 87413</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Sun E & P</u>	<u>PO Box 5940 TA Denver Colo 80217</u>

If well produces oil or liquids, give location of tanks

Unit	Sec.	Twp.	Rge.
<u>G</u>	<u>17</u>	<u>25N</u>	<u>2W</u>

Is gas actually connected? Yes When

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.

[Signature]
(Signature)

(Title)

6-2-87
(Date)

OIL CONSERVATION DIVISION
JUN - 8 1987

APPROVED _____, 19 _____

BY [Signature]

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 deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells 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 filled for each pool in multi-completed wells.