STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

Response Company Com	Operator Operator			
P. O. Box 3249 Englewood, CO 8015 Reason Critical Prisase explain) Critical Prisase explain Critical Pri		DEGEIVEIN		
New Well Change in Transporter of: Dry Gas Condensate	Address	M U		
New Well Change in Transporter of:	P.O. Box 3249, Englewood, CO 80155	OCT 02 1985		
Change of Ownership Casinghead Gas Condensate Con		Other (Please explain)		
Change of Ownership Casinghead Gas Condensate Con		OIF COM: DIA.		
If change of ownership give name and address of previous owner. FI Paso Natural Gas Company, P.O. Box 4990, Farmington, NM 87499 II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation A Blanco—MV Size, Federal or Fee USA O78417 Unit Letter A : 817 Feet From The North Une and 838 Feet From The East Lease Gas Company III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Or Organization Name of Authorized Transporter of Oil Organization Name of Oi		DIST. 3		
II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation State, Federal or Fee USA SF 078417 Location Unit Letter A : 817 Feet From The North Une and 838 Feet From The East Line of Section 20 Township 28N Range 7W NMFM Rio Arriba County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Unit Sec or by Gas X Description of Section 10 Inc. Surface. Transportation Name of Authorized Transporter of Casinghase Gas Company If well produces oil or liquids, give location of tanks. If the production is comminished with that from any other lease or poot, give commongling order number NOTE: Complete Parts IV and V on reverse side if necessary. IV. CERTIFICATE OF COMPLIANCE hereby certify that the rules and regulations of the Oil Conservation Division have been complete with and that the information given is true and complete to the best of my knowledge and belief. If this is a request for allowable or namely drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 1104. All sections of this come, self-lead or namely drilled or deepened well, this form must be accompanied to a tabulation of the deviation tests taken on the well in accordance with RULE 1110. APPROVED This form is to be filed in compliance with RULE 1104. If this is a request for allowable on one mith RULE 1111. All sections of this form must be filled out completely for allowable on one mith RULE 1111. All sections of this form must be filled out completely for allowable on one more mith RULE 1111. All sections of this form must be filled out completely for allowable on one more mercompleted wills. Fill out by Section I, III, III and or completed or number of the properties	Condensate			
Lease No. St. 28-7 Unit	If change of ownership give name and address of previous owner <u>El Paso Natural Gas Compa</u>	ny, P.O. Box 4990, Farmington, NM 87499		
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If well produces oil or liquids, give location of tanks. If well produces oil or liquids, give location of tanks. If well produces oil or liquids, give location of tanks. 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 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. BY TITLE SUPLEVISOR DETRICT # 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 labulation 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 walls. Fill out only Section I, II, III, and VI for changes of owner, well name and or number or transporter.	Conoco Inc. Sunfaco Inanonementias			
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(Data)	III.I I IVXA	or other such change of condition.		
Separate Forms C-104 must be filed for each pool in multiply completed wells.	(Date)	or other such change of condition.		