

5-NMOCD 1-Giant 1-Pioneer 1-File

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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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

I. Operator
Pioneer Production Corp.

Address
Box 208, Farmington, NM 87499

Reason(s) for filing (Check proper box)

☐ New Well	Change in Transporter of:	☐ Oil	☐ Dry Gas
☐ Recompletion	☐ Casinghead Gas	☒ Condensate	
☐ Change in Ownership			

Other (Please explain)
Change of transporter
Effective 12-1-84

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lucerne D	Well No. 1E	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. NM 010063
Location Unit Letter M : 1030 Feet From The South Line and 880 Feet From The West Line of Section 21 Township 28N Range 11W NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Giant Refining, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ El Paso Natural Gas Co. (No Change)	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit M Sec. 21 Twp. 28N Rge. 11W	Is gas actually connected? When Yes

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

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.

Jim L. Jacobs (Signature)
Geologist
(Title)
(Date)

OIL CONSERVATION DIVISION

NOV 27 1984

APPROVED _____ 19
BY *Frank J. [Signature]*
TITLE SUPERVISOR 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.