

SEP 2 9 1989

OIL CON. DIV

DIST. 3

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

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

. ** (*** ***	****		
DISTRIBUTION			
SANTA PE			_
FILE			
U.1.0.4,		1	
LAND OFFICE			_
TRANSPORTER	OIL		
	GAS		
OPERATOR.			
PAGRATION OFFICE			

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

A:	•		
Oberaries			
Hicks Oil & Gas, Inc.			
Address			
P.O. Drawer 3307, Farmington, NM 87499			
son(s) for filing (Cheek proper box) Other (Please explain)			
New Well Change in Transporter of:	·		
Aecompletion X Oil D	Effective 10-01-89		
Change in Ownership Castnghead Gas C	Condensate		
If change of ownership give name			
and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Well No. Pool Name, including f	ormation Kind of Lease Lease No.		
Southeast Cha Cha 21. 38 Cha Cha Gall	up State, Federal or Fee Federal NM -09979		
Location			
Unit Letter L : 2100 Feet From The South Lin	ne and 990 Feet From The West		
Line of Section 22 Township 28N Range	13W , NMPM, San Juan County		
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent) is gas actually connected? When		
f 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.			
i di			
71. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
	APPROVED SEP 2 9 1989		
hereby certify that the rules and tegulations of the Oil Conservation Division have seen complied with and that the information given is true and complete to the best of			
original Signed by FRANK T. CHAVEZ			
,	II		
$1 \bigcirc / \cdot$	TITLE		
// //	This form is to be filed in compliance with RULE 1184.		
Jim Hicks (Signature)	If this is a request for ellowable for a newly drilled or despends well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with NULE 111.		
President (Title)	All sections of this form must be filled out completely for allow-		
9/28/89	able on new and recompleted wells. Fill out only Sections 1, II. III, and VI for changes of owner.		
(Date)	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.		