STATE UP NEW MEXICO

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DISTRIBUTION			
SANTA FE]	
FILE			
u.s.a.s.			
LAND OFFICE			
THAMSPORTER	DIL		
	PAS		
DPERATOR			

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

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

REQUEST FOR ALLOWABLE AND

TOWN THE PERSON OF THE PERSON	ND
I. AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS
Operand	
Chase Energy, Inc.	المراجع المحاجم والمراجع المراجع ال
Address	
c/o Allen Consulting, Inc., 2501 E. 20th, Farming	aton. New Mexico 87401
Reason(s) for filing (Check proper box)	
New Well Change in Transporter of:	Other (Please explain)
	MAY 2 3 1086
	ondename William St. 1 and
I change of ownership give name	
and address of previous owner	
T DESCRIPTION OF PURE LAW TO LOCAL	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
I. DESCRIPTION OF WELLAND LEASE Lease Name [Well No. Pool Name, Including F	
	- Lease Ma
Ute Mtn. "B" 10 Verde Gallup	State, Federal or Fee Fed NM 238
	2205 West
Unit Letter N : 535 Feet From The South	west andF⊷t From The
Line of Section 29 Township 31N	15W San Juan
Line of Section 29 Township 31N Runge	15W San Juan County
THE DESIGNATION OF THE PARTY OF	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS
Name of Authorized Transporter at CII ar Condensate	Address (Give address to which approved copy of this form is to be sent)
Giant Refining Company	606 Hwy 64, Farmington N. M. 87401
None of Authorized Transporter of Cosinghed Cas at Dry Cas	Acareus (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, Unit Sec. Twp. Rgs.	Is gas actually connected? When
give location of tanks. N 29 31N 15W	The second secon
I 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	- DIL CONSERVATION DIVISION
VI. CERTIFICATE OF COMMENCE	DIL CONSERVATION DIVISION
hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED 1986
ken complied with and that the information given is true and complete to the best of	Drank J.
ny knowledge and belief.	BY
4	SUPERVISOR DISTRICT # 3
	TITLE SUPERVISOR DISTRICT # 0
	This form is to be filed in compliance with RULE 1104.
THE STEP	If this is a request for allowable for a newly drilled or demand
Coordany (Transver	wall, this form must be accompanied by a isbulation of the deviction
Secretary/Treasurer	tests taken on the well in accordance with RULE 111.
(73/2)	All sections of this form must be filled out completely for allow able on new and recompleted wells.
> 6.91060	Fill out only Sections I. H. III. and VI for changes of name
(Date)	well name or number, or transported or other auch change of condition
·	Separate Forms C-104 must be filled for each pool in multiple
ı	completed wells.