

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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 Ozark Exploration, Inc.

Address suite 1525  
Two Turtle Creek Village, Dallas, TX 75219

Reason(s) for filing (Check proper box)

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

Other (Please explain) EFFECTIVE DATE 2/1/91

If change of ownership give name and address of previous owner UMC PETROLEUM CORPORATION, 1201 LOUISIANA, SUITE 1400, HOUSTON, TEXAS 77002

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>FEDERAL 26</u>	Well No. <u>1</u>	Pool Name, including Formation <u>STUGART (Y-SR-Q-G)</u>	Kind of Lease State, Federal or Fee <u>FEDERAL</u>	Lease No. <u>029392B</u>
Location				
Unit Letter <u>0</u> ; <u>1980</u> Feet From The <u>EAST</u> Line and <u>330</u> Feet From The <u>SOUTH</u>				
Line of Section <u>26</u> Township <u>18S</u> Range <u>31E</u> , NMPM, <u>EDDY</u> 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"/> <u>NAVAJO REFINING</u>	Address (Give address to which approved copy of this form is to be sent) <u>BOX 159, ARTESIA, NM 88210</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>CONOCO, INC.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. BOX 1267, PONCA CITY, OK 74605</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<u>0 26 18S 31E YES</u>

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)

Pres.

(Title)

2-22-91

(Date)

OIL CONSERVATION DIVISION

MAR 8 1991

APPROVED \_\_\_\_\_, 19

BY ORIGINAL SIGNED BY

TITLE MIKE WILLIAMS  
SUPERVISOR, DISTRICT II

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 deviated 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 multiple completed wells.