

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Gzark 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"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

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 FEDERAL 26	Well No. 2	Pool Name, including Formation STUGART (Y-SR-Q-G)	Kind of Lease State, Federal or Fee FEDERAL	Lease No. 029392B
Location Unit Letter J ; 1880 Feet From The SOUTH Line and 1880 Feet From The EAST Line of Section 26 Township 18S Range 31E , NMPM, EDDY 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"/> NAVAJO REFINING	Address (Give address to which approved copy of this form is to be sent) BOX 159, ARTESIA, NM 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> CONOCO, INC.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1267, PONCA CITY, OK 74603	
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 26
	Twp. 18S	Rge. 31E
	Is gas actually connected? When	

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.

Pres.

(Signature)

(Title)

2-22-91

(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 8 1991

BY ORIGINAL SIGNED BY

MIKE WILLIAMS

TITLE 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 multiphase completed wells.