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STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

O. C. D.

ARTESIA 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

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DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

**I. Operator**  
W. A. Moncrief, Jr. ✓

**Address**  
Moncrief Building, Ninth at Commerce, Ft. Worth, Texas 76102

**Reason(s) for filing (Check proper box)**

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

If change of ownership give name  
and address of previous owner \_\_\_\_\_

### II. DESCRIPTION OF WELL AND LEASE

<b>Lease Name</b> Jurnegan	<b>Well No.</b> 1	<b>Pool Name, Including Formation</b> Mosley Canyon Strawn	<b>Kind of Lease</b> State, Federal or Fee State	<b>Lease No.</b> LG-5750
<b>Location</b>				
Unit Letter <u>C</u> : <u>1980</u> Feet From The <u>West</u> Line and <u>660</u> Feet From The <u>North</u>				
Line of Section <u>8</u> Township <u>24S</u> Range <u>25E</u> , NMPM, <u>Eddy</u> County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

<b>Name of Authorized Transporter of Oil</b> <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	<b>Address (Give address to which approved copy of this form is to be sent)</b>
Navajo Refining Company	P. O. Box 159, Artesia, New Mexico 88210
<b>Name of Authorized Transporter of Casinghead Gas</b> <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	<b>Address (Give address to which approved copy of this form is to be sent)</b>
El Paso Natural Gas Company	P. O. Box 1492, El Paso, Texas 79978
<b>If well produces oil or liquids, give location of tanks.</b>	<b>Is gas actually connected? When</b>
Unit <u>C</u> Sec. <u>8</u> Twp. <u>24S</u> Rge. <u>25E</u>	Yes <u>1-25-82</u> <u>Post 20-3</u>

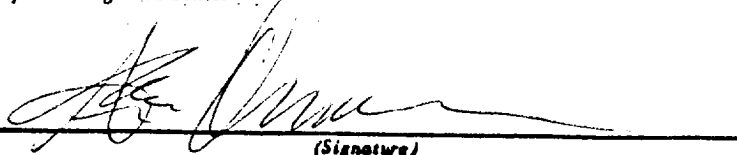
If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

3-27-87  
chg LT:JMP

### 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)

Ed Omar, P.E., Production Manager

(Title)

3-16-87

(Date)

### OIL CONSERVATION DIVISION

MAR 20 1987

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

BY \_\_\_\_\_  
Original Signed By  
Les A. ClementsTITLE \_\_\_\_\_  
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 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.