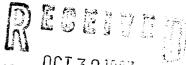
## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

#0. 00 (00100 BELEIVED			
DISTRIBUTION		1	
SANTA PE		_	<del>                                     </del>
FILE		1	1
V.S.D.S.		1	
LAND OFFICE		1	
TRANSPORTER	OIL	1	
	DAS		
OPERATOR			
PRORATION 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



OCT 3 0 1987 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Alpine Oil & Gas Corporation P. O. Box 2567, Durango, CO 81302 Phone: 303-247-5386 Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion OII Dry Gas Change of Operator Change in Ownership Casinghead Gas Condensate revious Operator: Ken Blackford, 8409 Wayne Ave., Lubbock, Texas 79424 and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Lease Name Pool Name, Including Formation Kind of Lease Indian
State, Federal or Fee Federal Legae No. Jicarilla 37-B 3 Ballard PC Location South Unit I eller East eet From The Line of Section Rio Arriba Township Range NMPM County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas

Address (Give address to which approved copy of this form is to be sent) El Paso Natural Gas Co. P.O. Box 990, Farmington, NM 87499 Unit Sec. Is gas actually connected? Rge. If well produces oil or liquids. give location of tanks. Yes 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,

Thomas &	Grandin L
President	(Signature)
10/29/87	(Title)
	(Date)

OIL CONSERVATION	DIVISION
------------------	----------

APPROVED SUPERVISOR DISTRIOT # 1

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.