

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION 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

Operator ELLIOTT OIL COMPANY	
Address P.O. Box 1355, Roswell, New Mexico 88202	
Reason(s) for filing (Check proper box)	Other (Please explain)
☐ New Well ☐ Recompletion ☐ Change in Ownership	Change in Transporter of: ☐ Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate Pool Change <u>R-8544</u>

If change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Ora	Well No. 2	Pool Name, including Formation West Lindrith Gallup/Dakota	Kind of Lease State, Federal or Fee Fed	Lease No. SF080536
Location				
Unit Letter G	1750	Feet From The North Line and	2000	Feet From The East
Line of Section 21	Township 25N	Range 3W	NMPM, Rio Arriba County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Giant Refining Co.	Address (Give address to which approved copy of this form is to be sent) Box 256, Farmington, N.M. 87499
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ El Paso Natural	Address (Give address to which approved copy of this form is to be sent) Box 990, Farmington, N.M. 87401
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. 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.

[Signature]
(Signature)
Owner
12/30/87
(Date)

OIL CONSERVATION DIVISION

APPROVED [Signature] 12
BY [Signature]
SUPERVISOR DISTRICT #

TITLE
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.