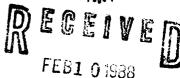
STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

PO. 04 (0*:40 *11		
DISTRIBUTION		
SANTA FE		
FILE		
V.1.0.4.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROBATION 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	RALLOWABLE		LEDI	. U 1556	
	ND		OII CO		_
AUTHORIZATION TO TRANS	PORT OIL AND N	ATURAL GAS	OIL CO	'N. DI\	/. }
				7. 3	
Operator					
JEROME P. McHUGH					
Address					
P O Box 809, Farmington, NM 87499					
Reason(s) for filing (Check proper box)	Other (P	lease explain)			
New Well Change in Transporter of:					
Recompletion Oil Dr	y Gas				
	ondensate Effe	densate Effective 2/1/88			
					,
f change of ownership give name and address of previous owner					 _
•					
I. DESCRIPTION OF WELL AND LEASE		Kind of Le			Legae No.
Leese Name Well No. Pool Name, Including Fo	otwarion	State, Fed			_
Jicarilla 5 Basin Dakota		State, 7 au	701 07 7 44	Indian	JC120
Location					
Unit Letter D : 890 Feet From The North Lin	• and <u>880</u>	Feet From	m The <u>West</u>		
Line of Section 29 Township 26N Range	04W . N	IMPM, R	io Arriba		County
		•			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	. GAS		,,-,-		
Name of Authorized Transporter of Cil or Condensate	Address (Give address to which approved copy of this form is to be sent)				
P.O. Roy 256 Farmington N.M. 87499					
Giant Refining, Inc. Address (Give address to which approved copy of this form is to be sent)					
Northwest Pipeline Corp. (No Change)	P.O. Box 8900, Salt Lake City, Utah 84108				
Unit Sec. Twp. Rge.	is gae actually connected? When				
of well produces oil or liquids. D 29 26N 04W					
f this production is commingled with that from any other lease or pool,	rive commingling	order number:			
					
NOTE: Complete Parts IV and V on reverse side if necessary.					
	OIL CONSERVATION DIVISION				
VI. CERTIFICATE OF COMPLIANCE	FEB 1 0 1988				
hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED_		1 L D 1 (7 1000	9
hereby certify that the rules and regulations of the On Constraint of the best of seen complied with and that the information given is true and complete to the best of					
my knowledge and belief.	BYOnt				
0 10	SUPERVISION DISTRICT # 3				
	This form is to be filed in compliance with RULE 1104.				
Am 1. X/a	If this is a	request for all	owable for a n	ewly drilled	l or deepenson
James S. Hazen / (Signature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.				
Field Supt.	All sections of this form must be filled out completely for allow-				
(Title)	able on new and recompleted wells.				
2/8/88	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.				
(Date)	Separate F	forms C-104 mi			
	completed wells				