STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

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DISTAIGUTION			
BANTA FE	Ι		
FILE		\mathbf{F}	
U.1.G.A.			
LAND OFFICE			
TRANSPORTER	OIL	I	
	Q AS	· .	
DPERATOR			
PROBATION OFFICE		Ī	I -

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

TRANSPORTER DIL	•		R ALLOWABLE -	المراكب المطفاح المبيد	٠.	
PROBATION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
I.						
Operator Brooks Hall Oil Corp	oration					
Address					•	
560 Triad Center, 50		essway, Oklaho				
Reason(s) for tiling (Check proper bo	Other (Please			f operator to be effect	ivo	
New Well	Change in Tro		_ · · ·			
Recompletion	ᆜᅄ	· 75 _	January 1, 1987			
Change in Ownership	Casinghe	od Gas Ca	ondensate	· · · · · · · · · · · · · · · · · · ·		
If change of ownership give name and address of previous owner		ge Corporation	a. 8101 N. W. 101	th, Oklahoma City, OK 7	3127	
II. DESCRIPTION OF WELL AN	Well No. Po	ol Name, Including F	ormat ion	Kind of Leose Jicarilla	Lease No	
Jicarilla	1	Tapacitos P.	. C.	State, Federal or Fee Contract	#119	
Location						
Unit Letter _ G : 18	320 Feet From T	he North Lin		Feet From The East	Count	
Line of Section 5 To	ownship 26N	Range	4W , NMPM	, Rio Arriba	Count	
III. DESIGNATION OF TRANS	ii or Conde	ensate [_]	Add: was force accident	to which approved copy of this form is		
Name of Authorized Transporter of C	asinghead Gas 🗀 · ·	or Dry Gas		to which approved copy of this form is		
Northwest Pipeline C	· · · · · · · · · · · · · · · · · · ·		P. O. Box 8900	O, Salt Lake City, Utah	84108	
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rgs.	is gas actually connect Yes	July, 1978		
If this production is commingled	with that from any c	other lease or pool.	give commingling orde	r number:		
NOTE: Complete Parts IV and	•		u	CONSERVATION DIVISION		
VI. CERTIFICATE OF COMPLL				JAN JAN	2,1987	
I hereby certify that the rules and regula been complied with and that the informa	itions of the Oil Conse ition given is true and c	complete to the best of	APPROVED	Frank J. Ja	vez	
my knowledge and belief.			TITLE	Supervis	OR GISTRICT	
Monay Vince	+	· · · · · · · · · · · · · · · · · · ·	16 this is a rec	o be filed in compliance with MU quest for allowable for a newly dr it be accompanied by a tabulation	illed or deepe	

Fish

Vice President

12-29-86

tests taken on the well in accordance with MULE 111.

All sections of this form must be filled out completely for all able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of conditions.

Separate Forms 304 must be filed for each pool in multipopulated wells.