(Tille)

(Date)

6/22/87

1 Petro Source

STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

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DISTRIBUTION		
SAMTA FE		
PILE		
V.1.0.4.		
LAND OFFICE		
-	OIL	
	GAB	
OPERATOR		
PROBATION OFFICE		ı I

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501



TRANSPORTER GAS	REQUEST F	FOR ALLOWABLE	OIL CON. DIV			
PROBATION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS DIST. 3					
JEROME P. McHUGH		······································	9			
P 0 Box 809, Farmingt	ton, NM 87499	· · · · · · · · · · · · · · · · · · ·				
Resson(s) for filing (Check proper box)		Other (Please explain)				
New Yell	Change in Transporter of:					
Recompletion	<u>XX</u> 011	Day Gos Effective 7/1/87				
Change in Ownership	Casinghead Gas	Condensate				
If change of ownership give name and address of previous owner						
II. DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including	Formation	Kind of Lease	Leese No.		
Apache	3E Basin Dakot	a	State, Federal or Fee Indian	JC98		
Location						
Unit Letter H: 1710	Feet From The North 1	_ine and1120	Feet From The East			
Line of Section 19 Towns	hip 26N Range	03W , NMPI	a, Rio Arriba	County		
III. DESIGNATION OF TRANSPO	DTER OF OU AND NATURA	AT GAS				
Rame of Authorized Transporter of Cil Petro Source Corp.	or Condensate XX	8777 E Via de	ventura, Suite 100, Sco	ottsdåle, A		
Name of Authorized Transporter of Casing	head Gas Ot Dry Gas XX	Address (Give address	to which approved copy of this form is	to be sent)		
Northwest Pipeline Corp.			Salt Lake City, Utah	84108		
If well produces oil or liquide, give location of tanks.	H 19 26N 03	Is gas actually connec	When The Street Company of			
If this production is commingled with t	that from any other lease or poo	l, give commingling orde	r number:			
NOTE: Complete Parts IV and V o						
VI. CERTIFICATE OF COMPLIANCE	CE	OIL C	OIL CONSERVATION DIVISION			
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.		APPROVED	JUN 24 1987 19			
		BY 3.0				
		TITLE	SUPERVISION DISTRIC			
Jam J. Hay	- 1	If this is a req	uest for allowable for a newly dri	Hed or deepens		
James S. Hazen Signature	" /	tests taken on the	well in accordance with AULE I	11.		

All sections of this form must be filled out completely for alleable 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.