

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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| 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

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MAY 21 1985

OIL CON. DIV.
DIST. 3

I. Operator
Harrison Oil & Gas Corporation
Address
P. O. Box 840, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☐ Change in Ownership
Change in Transporter of:
☒ Oil
☐ Gas
☐ Casinthead Gas
☐ Dry Gas
☐ Condensate

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|---|--|------------------------|
| Lease Name Old Rock Com | Well No. 3 | Pool Name, including Formation Devils Fork Gallup Assoc. | Kind of Lease State, Federal or Fee Federal | Lease No. NM 055814 |
| Location Unit Letter J : 1840 Feet From The South Line and 1805 Feet From The East Line of Section 28 Township 25N Range 6W, NMPM, Rio Arriba County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | |
|---|--|------------|--------------|------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Mancos Corporation | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1320, Farmington, New Mexico 87499 | | | |
| Name of Authorized Transporter of Casinthead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co. | Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, New Mexico 87499 | | | |
| If well produces oil or liquids, give location of tanks. | Unit J | Sec. 28 | Twp. 25N | Rge. 6W |
| Is gas actually connected? | Yes | | When 1/84 | |

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.

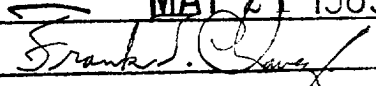

(Signature)

George S. Dunn, Operations Manager
(Title)

5/31/85
(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 21 1985, 19

BY 
TITLE SUPERVISOR DISTRICT # 3

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 deviated 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 multi-completed wells.