Form C-104 STATE OF NEW MEXICO Revised 10 01-78 Formal 00-01-83 ENERGY AND MINERALS DEPARTMENT OIL CONSERVATION DIVISION DISTRIBUTION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501 SANTAFE FILE V. 0.0.0 LAND OFFICE REQUEST FOR ALLOWABLE TRANSPORTER AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS PROPATION OFFICE Southern Union Exploration Company Operator Addison P. O. Box 2179 Farmington, NM 87499 Other (Please explain) Ressorts for liling (Check proper box) Change in Transporter of: Dry Gas OIL Condensole Hecompletion Caelnghead Gas Change in Ownership If change of ownership give name and address of previous owner Contract Well No. Pool Hame, Including Formation II. DESCRIPTION OF WELL AND LEASE State, Federal or Fee Federal 100 Blanco Mesa Verde 19 Jicarilla "D" East Feet From The Location South Feet From The_ County Rio Arriba Unit Letter_ имем, 26 Nange Township Line of Section Addisse (Give address to which approved copy of this form is to be sent) III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS P. O. Box 159 Bloomfield, NM 87413 Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil Gary Energy Corporation P. O. Box 1899 Bloomfield, NM Name of Authorized Transporter of Castnahead Gas of Dry Gas [X] is que actually connected? Gas Company of New Mexico Rq. If well produces oil or liquids, If this production is commingled with that from any other lease or pool, give commingling order numbers NOTE: Complete Parts IV and V on reverse side if necessary. OIL CONSERVATION DIVISION 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. Martin D. Boggs

Drilling & Production Supt. (Title)

December 15, 1987

(Date)

TITLE. This form is to be filed in compliance with RULE 1104,

If this is a request for silowship for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 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 Il name or number, or transporter or other such change of condit

Separate Forms C-104 must be filed for each pool in mult completed wells.