## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			1
SANTA PE			
FILE			
U.8.0.A.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			

## OIL CONSERVATION DIVISION,

Format 06-01-83

Form C-104 **Revised 10-01-78** 

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS CONT. DIV				
Department	Dist 2			
	J.C1, 3			
Hixon Devlopment Company				
Address				
PO Box 2810, Farmington, NM 87499				
Reason(s) for filing (Check proper box)  Other (Please explain)				
New Well Change in Transporter of:				
Recompletion Oil Dr	y Gas			
X Change in Ownership X Castrighead Gas Co	ondenagte			
If change of ownership give name  and address of previous owner Dugan Production Corporation PO Box 208, Farmington, NM 87499  II. DESCRIPTION OF WELL AND LEASE				
Legae Name Well No. Pool Name, including Fo	ormation Kind of Lease Lease No.			
	State Sederal of See . E. 1 1 NR 20700			
Divide 3 Gavilan Mar	icos redetal jui 20705			
Location				
Unit Letter K : 1780 Feet From The South Line and 2120 Feet From The West				
Line of Section 35 Township 26N Range	2W , NMPM, Rio Arriba County			
HIL DESIGNATION OF TRANSPORTER OF OIL AND NATURAL  Name of Authorized Transporter of CII Cor Condensate  Giant Transportation Coling or Condensate  Hame of Authorized Transporter of Cosinghead Gas (V) or Dry Gas Hixon Development Company  If well produces oil or liquids,  Unit Sec. Twp. Rge.	PO Box 2810, Farmington, NM 87499  PO Box 2810, Farmington, NM 87499  Address (Give address to which approved copy of this form is to be sent)  PO Box 2810, Farmington, NM 87499  Is gas actually connected?  When			
give location of tanks. K 35 26 2	yes 12-26-86			
NOTE: Complete Parts IV and V on reverse side if necessary.  OIL CONSERVATION DIVISION				
MI T BECTIFIC AT P CIC VENUE CONC.E.				
1 hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED				
been complied with and that the information given is true and complete to the best of	South J. James			
my knowledge and belief.	BY			
	SUPERVISOR DISTRICT 4 3			
TITLE				
This form is to be filed in compliance with RU				
Aldrich L. Kuchera (Signature)	If this is a request for allowable for a newly drilled or deepenso well, this form must be accompanied by a tabulation of the deviation.			
Described.				
All sections of this form must be filled out completely for all able on new and recompleted wells.				
May 7, 1987	Fill out only Sections I. H. III, and VI for changes of owner.			
(Date)	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.