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DEC 06 1984

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CON. DIV.  
DIST. 3

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator  
La Plata Gathering System, Inc.

Address  
c/o A. R. Kendrick, Box 516, Aztec, New Mexico 87410

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<u>Effective January 1, 1985</u>
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	
	<input checked="" type="checkbox"/> Dry Gas	
	<input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner El Paso Natural Gas Company, Box 1492, El Paso, Texas 79978

### I. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Largo</u>	Well No. <u>1</u>	Pool Name, Including Formation <u>Ballard Pictured Cliffs</u>	Kind of Lease <u>XXXX Federal on Fee SF-078631</u>	Lease No.
Location Unit Letter <u>D</u> : <u>990</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>West</u> Line of Section <u>9</u> Township <u>25 N</u> Range <u>7 W</u> , NMPM, <u>Rio Arriba</u> County				

### II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas Company</u>	<u>Box 1492, El Paso, Texas 79978</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
	<u>Yes</u> <u>12/10/59</u>

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

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.

A.R. Kendrick  
(Signature)  
Agent  
(Title)  
December 6, 1984  
(Date)

### OIL CONSERVATION DIVISION

APPROVED DEC 06 1984  
BY Frank J. [Signature]  
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 deviation 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 multiply completed wells.