STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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| BANTA FE | 1 | | |
| FILE | | | |
| U.S.O.S. | | | |
| LAND OFFICE | 1 | | |
| TRANSPORTER | OIL | | |
| | GAS | | |
| OPERATOR | | | |
| PROBATION OFF | | | |

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

RECEIVED

| OPERATOR PROBATION OFFICE | REQUEST F | FOR ALLOWABLE AND ASPORT OIL AND NATI | FEB1 0 1988 | |
|--|---|---|---|-------------|
| JEROME P. McHUGH | | | DIST. 3 | d - |
| Address P O Box 809, Farmington, N | M 87499 | | | |
| Reason(s) for filing (Check proper box) New Well Recompletion Change in Ownership | Change in Transporter of: | Other (Please Dry Gas Condensate Effecti | ve 2/1/88 | |
| If change of ownership give name and address of previous owner | | | | |
| II. DESCRIPTION OF WELL AND LE | | | | |
| Erin Stays Com | Well No. Pool Name, including | Formation | Kind of Lease | Lease |
| Location | l Basin Dakota | | State, Federal or Fee Federal | NM3778 |
| | Feet From The North | ine and : 790 | Feet From The East | |
| Line of Section 02 Township | 25N Range 1 | . NMPN | . San Juan | Cour |
| III. DESIGNATION OF TRANSPORT | | IL GAS | | |
| Name of Authorized Transporter of Cil | or Condensate XX | i i | to which approved copy of this form is | to be sent) |
| Giant Refining, Inc. Name of Authorized Transporter of Casinghet | | P.O. Box 256, F | armington, N.M. 87499 | |
| 1 | ad Gas of Dry Gas [X]X N o Chango) | T . | to which approved copy of this form is Farmington, NM 87499-4 | |
| If well produces oil or liquids, give location of tanks. | Sec. Twp. Rge. | Is gas actually connect | | `` |
| If this production is commingled with the | t from any other lease or pool | give commingling order | r number: | |
| NOTE: Complete Parts IV and V on a | • | - · | | |
| VI. CERTIFICATE OF COMPLIANCE | | OIL C | ONSERVATION DIVISION | |
| • | | 11 | FFD 4 0 4000 : | |

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.

| Anu | Slan | |
|------------|-------------------|--|
| James S. H | Hazen (Signature) | |
| 2/8/88 | (Tille) | |

(Date)

FEB 1 0 1988

BY SUPERVISION DISTRICT # 8

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

If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviations taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allo able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of ownst well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multip

completed wells.

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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

Form C-104 Revised 10-01-78 Format 06-01-63 Page 1

DECEINER

| TRANSPORTER | DIL | 1 1 | | | | | | | | | 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
|---|--------|------|-------------|---------------------|---------------------------------------|-----------------------------------|-----------------|----------------|------------------------|--------------------|--|
| | OAB | | | | R | FOUEST F | OR ALLOY | VARI E | בו או בי | | 6135 |
| OPERATOR . | | | | REQUEST FOR ALLOWAE | | | | | | 1000 | |
| PRORATION OFF | KE | | | ALITHO | RIZATION | | | L AND NATU | IDAL CAS | AR 2 3 1988 | Name of the last |
| I. | | | | | | I TO IKAN | SFUR FUR | L AND NATE | JKAL GAS | | • |
| Operator | | | | | • | | | | - CIL | CON. D | V |
| JEROME P. McHUGH | | | | | | | DIST. 3 | | | | |
| Address | | | | | | | | | | | |
| P O Box 8 | 09, | Far | mington, | NM 87 | 499 | | | | | | |
| Reason(s) for fil | ing (C | heck | proper box) | | · · · · · · · · · · · · · · · · · · · | | | Other (Pleas | e explain) | | |
| New Well | | | | Change ! | n Transport | er of: | | | | | |
| Recompletto | n | | | | | [Xk | Dry Gas | | | | ė. |
| Chenge in O | whers | hip | | ☐ c | inghead Gas | | Condensate | } | | | |
| | | | | | | <u></u> | - | l | | | |
| If change of owr and address of p | | | | | | | . | | | | |
| II. DESCRIPTION | ON C | F W | TELL AND L | EASE | | | | | • | | |
| Lease Name | | | | Well No. | Pool Name | , including | Formation | Kind of Lease | | Lease No. | |
| Erin Stay | rs C | om | | 1 | Basi | n Dakota | a . | | State, Federal or Fee | Federal | NM3778 |
| Location | | | | | L | | | * | I | | 11113776 |
| Unit Letter A : 790 Feet From The North Line and 790 Feet From The East | | | | | | | | | | | |
| Line of Section | n 02 | | Townshi | ip 2 | 25N | Range | 11W | , NMPM | . San Ju | ıan | County |
| III. DESIGNAT | TON | OF | TRANSPOR | TER OF | OII. AND | NATURA | L GAS | | | | |
| Name of Authoriz | | • | | or C | ondensate | <u> </u> | Address (| Give address t | to which approved copy | of this form is | o be sent) |
| Giant Refi | | | | no char | | | P O Bo | x 256, Fa | armington, NM | 87499 | |
| Name of Authorized Transporter of Castinghead Gas or Dry Gas XX Address (Give address to which ap | | | | | | o which approved copy | of this form is | o be sent/ | | | |
| Tamana D. W. H. I | | | | | | P O Box 809, Farmington, NM 87499 | | | | | |
| If well produces oil or liquids, Unit Sec. Twp. Rge. | | | ls gas act | ually connecte | od? When | 0,477 | , | | | | |
| give location of t | | | | 1 02 | 25 | 5N 11W | | | į | | |

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.

| Jan Ja Ja | |
|-----------------------|-----|
| James S. Hazen Fignal | we) |
| 3/22/88 (Title | 7 |

(Date)

OIL CONSERVATION DI

APPROVED BY SUPERVISOR DISTRICT

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

If this is a request for allowable for a newly drilled or despense well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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completed wells.