## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Signalway

(Title)

(Date)

Drilling & Production Supt.

December 15, 1987

DISTRIBUTION			
SANTA PE			_
FILE			
V.1.0.4.			
LAND OFFICE			_
TRANSPORTER	OIL		
	GAS		
OPENATOR			
PRODATION 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

REQUEST FOR ALLOWABLE

PROBATION OFFICE	AUTUODE	ZATION TO	A TRANSF	ND PORT OIL	UTAN DNA	RAL GAS	(100)	
I	AUTHORI.	ZATION TO	11(74(0)				The state of the s	<del>/</del>
Operator							Ulbi. g	,
Southern Union Exp	loration (	Company .						
Address				•				•
P. O. Box 2179 Farm	uington, N	<u>4 87499</u>			Other (Please			
Reason(s) for liling (Check proper box)			•	·	Jiner (Piease	Exhibitul		
New Well	Change in	Transporter o			grifig a	1 2		
Recompletion	O11			y Gas			. ,	
Change in Ownership	Casin	ghead Gas	LXIC	ndensate				
If change of ownership give name and address of previous owner.			·					
II. DESCRIPTION OF WELL AND	. DESCRIPTION OF WELL AND LEASE   Well No.   Pool Name, Including Formation					Kind of Lease		Lease No
Lease Name	"""		Dakota			State, Federal	or F Federal	SF-078432
Hodges	13	Dasini	Danoca			<u> </u>		<u> </u>
Location			1.1	1 1	-20		Fact	
Unit Letter B : 109	90 Feet From	n The <u>Sout</u>	hLir	• and	520	Feet From Ti		County
Line of Section 34 Tow	mehlp 26		lang#		, NMPN	i, Sai	n Juan County	County
III. DESIGNATION OF TRANSP Name of Authorized Transporter of Oil Gary Energy Corporat	ion	,,,, <del></del>	·	D O	Pox 159	Bloomfie.	ed copy of this form in 1d, NM 87413 and copy of this form i	}
Name of Authorized Transporter of Cas	Inghead Gas [	of Dry G	יי נפייי		Box 990	and the second second	on, NM 8749	
El Paso Natural Gas			15		ually connect			
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp.	Rge.	is das dei		1	***************************************	
If this production is commingled wit	th that from an	y other leas	e or pool,	give comm	ingling orde	t namperi		
NOTE: Complete Parts IV and I								•
VI. CERTIFICATE OF COMPLIA					OIL	DEC 09	ION DIVISION 387	
I hereby certify that the rules and regulation to the complied with and that the information of the converge and belief.	ons of the Oil Co on given is true ar	onservation Di ad complete to	vision have the best of	APPRO	Bin	vision dis	GRICT # 3	_, 19
Martin D. Boggs				TITLE	SUPER	TIUIUM MIN		
Ma No Ba				Th	la form la t	o be filed in c	ompliance with RU	LE 1104. illed or deeper

well, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with MULE 111.

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

Fill out only Sections I. II. III, and VI for changes of own well name or number, or transporter, or other such change of condition

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