

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.D.S.	
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/> OIL
OPERATOR	<input type="checkbox"/> GAS
PRODUCTION OFFICE	

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

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AUG 05 1985

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

JUL 29 1985

Operator
Davis Drlg., Inc.

OIL CON. DIV.
DIST. 3

Address
P. O. Box 139, Great Bend, Kansas 67530

Reason(s) for filing (Check proper box)

☐ New Well
☐ Recompletion
☐ Change in Ownership

Change in Transporter of:
☒ Oil
☐ Casinghead Gas

☐ Dry Gas
☐ Condensate

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla Apache T 1151	Well No. 3	Pool Name, including Formation Boulder Mancos	Kind of Lease State, Federal or Fee Federal	Lease No. 240
Location 248				
Unit Letter J : 2310 Feet From The S Line and 2310 Feet From The E				
Line of Section 26 Township 28N Range 1W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipeline, Inc.	Address (Give address to which approved copy of this form is to be sent) Box 1887, Bloomfield, N. M. 87413
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When

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.


(Signature)

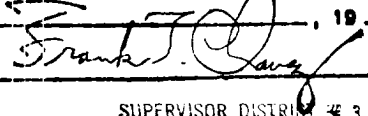
President

(Title)

7/25/85

(Date)

OIL CONSERVATION DIVISION
AUG 05 1985

APPROVED  19
BY
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 deviated 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 multiple completed wells.