

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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	GAS	
OPERATOR		
PRODUCTION OFFICE		

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
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

30-045-06323

I. Operator
Alex N. Campbell

Address
136½ North Larchmont Blvd, Suite A, Los Angeles, CA 90004

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)

DEC 12 1984
OIL CON. DIV.
DIST. 3

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Tonkin Federal	Well No. #1	Pool Name, including Formation Basin Dakota 71599	Kind of Lease State, Federal or Fee Federal	Lease No. NM 02691
Location Unit Letter P : 790' Feet From The South Line and 790 Feet From The East Line of Section 23 Township 27N Range 12W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Permian Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1702, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co.	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 P Sec. 23 Twp. 27N Rge. 12 W	Is gas actually connected? When yes

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)

AGENT

(Title)

12-11-84

(Date)

OIL CONSERVATION DIVISION

APPROVED

DEC 18 1984

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 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.

CMD :
OG6WCMP

ONGARD
C104-AUTHORIZATION TO TRANSPORT

09/20/94 13:52:32
OGOAD -EMEK

OGRID Idn : 355 API Well No : 30 45 6323 Pool Code : 71599
Operator Name : ALEX N CAMPBELL
Prop Name : TONKIN FEDERAL Well No : 001
B.H. Location: UL : P Sec : 23 Twp : 27N Range : 12W Lot Idn :
Prod Method (F/P) : F C104 Aprvl Dte : Gas Conn Dte :
NFO Permit No : NFO Eff Dte : NFO Exp Date :
Remove POD from WC: N Remove Transporter from POD : Y

Sel:
Transporter Idn : Name :
Point of Disp : 653310 Transporter type (G/O/W) :
Transporter Idn : 7057 Name : EL PASO NATURAL GAS CO
Point of Disp : 653330 Transporter type (G/O/W) : G
Transporter Idn : Name :
Point of Disp : 653350 Transporter type (G/O/W) :
Production Test : First Oil Prod Dte : 01-01-1900 Gas Dlv Date: 01-01-1900
Test Date : Tubing Pressure : Choke Size :
Oil(BOPD) : Gas(MCFD) : Water(BPD) :
AOF(MCFD) :

M0015: Table update is successful.

PF01 HELP	PF02	PF03 EXIT	PF04 GoTo	PF05	PF06 CONFIRM
PF07	PF08	PF09 COMMENT	PF10	PF11	PF12 NXTRNSP

Request for POD Number Assignment

Operator OGRID: 008503

Please assign a POD number to the following completions:

POD Description: Burton Flat Comp.

Location by ULSTR: S2 T21S R27E

County: 015 Product Type: 04

Facility Type: 04 Transporter(s) Name(s)

OGRID(s)

Navajo Refining Co.

015684

POOL CODE

API NUMBER

Signature

Printed name and Title

Phone