

REPORTER	
DISTRICT	
OFFICE	
REPORTER	OIL
	GAS
LOCATION	
LOCATION 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

**RECEIVED**  
MAY 16 1986  
OIL CON. DIV.  
DIST. 3

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Name: BRECK OPERATING COMPANY *Corp*  
Address: P. O. Box 911 Breckenridge, Texas 76024

Reason(s) for filing (Check proper box):  
 New Well  
 Recompletion  
 Change in Ownership  
 Change in Transporter of:  
 Oil  
 Gashead Gas  
 Dry Gas  
 Condensate  
 Other (Please explain):  
Effective 5/1/86  
Change in Operator from Damson Oil  
to Breck Operating *Corp*

Age of ownership give name and address of previous owner: \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE

Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Farming "A"	1	Fulcher Kutz PC	State, Federal or Fee State	E-1201

Location: H 1650 Feet From The N Line and 990 Feet From The E Corner of Section 16 Township 27N Range 9W, N.M.P.M., San Juan County \_\_\_\_\_

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

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)
of Authorized Transporter of Gashead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas Company</u>	<u>P.O. Box 990 Farmington, N.M. 87499</u>

Unit, Sec., Twp., Rqs. \_\_\_\_\_  
 Is gas actually connected? \_\_\_\_\_ When \_\_\_\_\_  
 production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

3: Complete Parts IV and V on reverse side if necessary.

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.

FOR: BRECK OPERATING COMPANY  
 ORIGINAL SIGNED BY  
EWELL N. WALSH  
 \_\_\_\_\_  
 Ewell N. Walsh *(Signature)* P.E.  
 Walsh Engr. & Prod. Corp.  
 \_\_\_\_\_  
*(Title)*  
5/15/86  
 \_\_\_\_\_  
*(Date)*

OIL CONSERVATION DIVISION

APPROVED MAY 16 1986  
Frank J. Cawley  
 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 filled for each pool in multiply completed wells.