## STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

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DISTRIBUTI	0=	i
BANTA PE		
FILE		1
U.A.G.A.		
LANG OFFICE		
TRAMSPORTER	OIL	
	-	
OPERATOR .		
PROBATION OFFICE		

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

Form C-104 Revised 10-01-78 Format 05-01-83 Page 1

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. AUTHORIZATION TO TRANSPORT CIL AND NATURAL GAS							
Union Texas Petroleum Cor	poratio	on					
P. O. Box 1290, Farmingto	n, New	Mexico 87499					
Reason(s) for filing (Check proper box)  Change in Transporter of:			<del></del>	Other (Please explain)			
Remapieties	☐ on		Dry Gas		•		
If change of ownership give name	Cast	rehoud Gas X	Condensete				
and address of previous owner							
II. DESCRIPTION OF WELL AND LE		Pool Name, inclusing	Formation	<del></del>	Kind of Lease	Letter No.	
Navajo "B"	6	Basin Dakota		7	State, Federal or Fee Fed		
Unit Letter N : 790 Feet From The South Line and 1850 Feet From The West							
Line of Section 19 Township			8W	, NMPM,		County	
III. DESIGNATION OF TRANSPORT	ER OF C	OIL AND NATURA	L GAS				
Name of Authorized Transporter of CII or Condensate			Andres (	Andreas (Give address to which approved copy of this form is to be sent)			
Gary Energy Corporation  Name of Authorized Transporter of Casinghedd Gas or Dry Gas			Address (	P. O. Box 489, Bloomfield, N.M. 87413  Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Company			P. 0.	P. O. Box 990, Farmington, N.M. 87499			
If well produces oil or liquids, unit give location of tanks.	, s.c. V ; 19	7wp. Rgs. 27N 8W	Yes ect	ually connecte	47 When		
If this production is commingled with the	t from any	other lease or pool,	give comm	ingling order	number:		
NOTE: Complete Parts IV and V on	reverse si	de if necessary.			•		
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISIO					ON		
I hereby certify that the rules and regulations of the Oil Conservation Division have				APPROVED NOV 0 1984			
been complied with and that the information given is true and complete to the best of my knowledge and belief.							
			TITLE		SUPERVIOR DISTRIC	T # 3	
Kenneth E. Polly			1	This form is to be flied in compliance with RULE 1104.			
If this is a request for allowable for a newly deliled or down							
Area Production Superintendent			teets th	well, this form must be accompanied by a tabulation of the deviation teets taken on the well in accordance with RULE 111.			
(Title)			SDIS OU	All sections of this form must be filled out completely for allowable on new and recompleted wells.			
			Fill well nam	Fill out only Sections L. III with VI for Changes of owner, well name or number, or transporting or other such change of condition.			
•		-	Sepi complete	erate Forms	C-104 hist be filed for	each pool in multiply	
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OIL CON. DIV.