

## STATE OF NEW MEXICO

## ENERGY AND MINERALS DEPARTMENT

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

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

RECEIVED

JUN 24 1987

OIL CON. DIV.  
DIST. 3REQUEST FOR ALLOWABLE  
AND

## AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.S.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

I. **Operator**  
JEROME P. McHUGH

**Address**  
P O Box 809, Farmington, NM 87499

**Reason(s) for filing (Check proper box)**

<input type="checkbox"/> New Well	<b>Change in Transporter of:</b>	<input type="checkbox"/> Dry Gas	<b>Other (Please explain)</b>  Effective 7/1/87
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas		

If change of ownership give name  
and address of previous owner \_\_\_\_\_

## II. DESCRIPTION OF WELL AND LEASE

<b>Lease Name</b> Florance	<b>Well No.</b> 1	<b>Pool Name, including Formation</b> Basin Dakota	<b>Kind of Lease</b> State, Federal or Fee Federal	<b>Lease No.</b> SF078566A
<b>Location</b>				
Unit Letter <u>E</u> : <u>1770</u> Feet From The <u>North</u> Line and <u>1090</u> Feet From The <u>West</u>				
Line of Section <u>26</u> Township <u>28N</u> Range <u>08W</u> , NMPM, San Juan County				

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

<b>Name of Authorized Transporter of Oil</b> <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Petro Source Corp.	<b>Address (Give address to which approved copy of this form is to be sent)</b> 8777 E Via de Ventura, Suite 100, Scottsdale, AZ 85258
<b>Name of Authorized Transporter of Casinghead Gas</b> <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co.	<b>Address (Give address to which approved copy of this form is to be sent)</b> P.O. Box 4990 Farmington, NM 87499
<b>If well produces oil or liquids, give location of tanks.</b>	<b>Is gas actually connected?</b> When
Unit <u>E</u> Sec. <u>26</u> Twp. <u>28N</u> Rge. <u>08W</u>	

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.

James S. Hazen  
Field Supt.

(Title)

6/22/87

(Date)

## OIL CONSERVATION DIVISION

JUN 24 1987

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

BY James S. HazenTITLE SUPERVISION 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.