

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator
Pioneer Production Corp.

Address
P.O. Box 208, Farmington, NM 87499

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	Change of transporter Effective 12-1-84
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> casinghead Gas	
	<input checked="" type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Rhodes	Well No. 1	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. SF 08044
Location				
Unit Letter G	1650	Feet From The North	Line and 1700	Feet From The East
Line of Section 20	Township 28N	Range 11W	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"/>	Giant Refining, Inc.				Address (Give address to which approved copy of this form is to be sent) Box 256, Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	El Paso Natural Gas Co. (No Change)				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 G	Sec. 20	Twp. 28N	Rge. 11W	Is gas actually connected? Yes	When

If this production is commingled with that from any other lease or pool, give commingling order numbers:

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.

Jim L. Jacobs
Jim L. Jacobs (Signature)
Geologist (Title)

(Date)

RECEIVED
NOV 27 1984
OIL CON. DIV.
DIST. 3

OIL CONSERVATION DIVISION
NOV 27 1984
APPROVED _____ 19____
BY *Frank J. O'Neil*
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.