Separate Forms C-104 must be filed for each pool in multiply completed wells.

## STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

40. 00 10PHE 01		Т	
DISTRIBUTION			T
SANTA FE		1	<del>                                     </del>
FILE			†
V.1.4.		+-	+
LAND OFFICE		1	<del>                                     </del>
TRANSPORTER	OIL	1	<del>                                     </del>
	944		
SPERATOR			
PROBATION OFFICE		_	

## OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 08-01-83 Page 1

REQUEST FOR ALLOWABLE

PROBATION OFFICE	AA			1	DEC 3 G		
I. AUTHORIZATION TO	TRANSP	PORT OIL	TAN DNA	URAL GAS	04.0	e e e e e e e e e e e e e e e e e e e	
Operator		<del></del>			41 COM		5 <del>5</del>
RAYMOND T. DUNCAN				<b>5</b> 00	Disi.	473	
Address						''	
PO Box 208, Farmington, NM 87499							
Reeson(s) for liling (Check proper box)		——	Other (01-				
New Well Change in Transporter of:	Change in Transporter of			se expiain)			
Recompletion 🕅 OII		Dry Gas Effective 12-22-86					
Change in Ownership Casinghead Gas							
		ndensate	·				
If change of ownership give name and address of previous owner							·
II. DESCRIPTION OF WELL AND LEASE							
Leese Name Well No. Pool Name, Incl	Indian For						
North Hogback 12 2 Slickroc				Kind of Leas	i va vajo		Legse No.
Location	- Dane			State, Federa	lor Fee 14-	20-0603	-10010
Unit Letter A : 990 Feet From The Nor	th Line	and99	0	Feet From '	The	Ea	st
Line of Section 12 Township 29N						<del></del>	<del></del>
Cine of Section   2 Township 29N Ron	×9• 17	W	, NMPL	, San Ju	ıan		County
III. DESIGNATION OF TRANSPORTER OF AT							
Mane of Authorized Transporter of OIL (AND NAT)	TURAL C	GAS		·			
Petro Source Corp.	or Condensate Address (Give address to which approved copy of this form is to be sent)  185 South State St. #900, Salt Lake City, UT 8411				be sent)		
Name of Ambana and Amb		82 20m	th State	St. #900,	, Salt Lake	e City,	UT 84111
or Dry Gas	<b>□</b>  ^	Address (G	ive address	to which approx	ed copy of this	form is to	be sens)
If well produces all or liquids, Unit Sec. Twp. R	qe. Is	s que actua	THY CONNECTE	ed? Whe		<del></del>	
displacement of the second of	17W	No		1			
If this production is commingled with that from any other lease or					<del></del>		<del></del>
		A COLUMIN	igling order	unwper:			
NOTE: Complete Parts IV and V on reverse side if necessary.							
VI. CERTIFICATE OF COMPLIANCE	11		<b></b>				
VI. CERTIFICATE OF COMPEIANCE	- 11		OIL C	ONSERVAT	ION DIVISIO	NC	
hereby certify that the rules and regulations of the Oil Conservation Division	, have	APPROV			DF	C 30	าใจลด
seen complied with and that the information given it this and complete to the b	est of	APPROV	ED		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	= <del></del>	, 1000
ny knowledge and belief.	- 11	BY	·		Trans	<u> </u>	ava
	7	TITLE _			SUPERVISO	R DISTRICT	<b>#</b>
Quel Came		This	form is to	be filled in co	ompliance with		104
Bud Crane (Signature)	<b></b> ∥	Մ հեն	s is a requi	est for allows	ble for a seed	1	
Agent		ests take	n on the w	ell in accord	THE BY E (EDG)	ation of () LE 111.	ne deviation
(Tule) 12-29-86	_    .			ombiered meli			
(Date)	-	Fill o	or number,	ctions I, II, or transporter	III, and VI for other such	change o	e of owner, I condition
	11	F					