

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

NO. OF COPIES RECEIVED		
DISTRIBUTION		
ANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
OPERATOR	GAS	
REGISTRATION OFFICE		

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
JAN 25 1985

Operator <u>ORVILLE SLAUGHTER</u>		OIL CON. DIV DIST. 3
Address <u>2626 ADAMS ST DENVER COLO 80205</u>		
Reason(s) for filing (Check proper box)		Other (Please explain)
<input type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

change of ownership give name
and address of previous owner N/A

DESCRIPTION OF WELL AND LEASE			
Lease Name <u>SANGRE DE CRISTO</u>	Well No. <u>1</u>	Pool Name, including Formation <u>FARMINGTON OSWELL POOL</u>	Kind of Lease <u>FEDERAL</u> State, Federal or Fee
			Lease No. <u>\$F0432604</u>
Location Unit Letter <u>D</u> : <u>1055</u> Feet From The <u>NORTH</u> Line and <u>165</u> Feet From The <u>WEST</u>			
Line of Section <u>34</u> Township <u>30N</u> Range <u>11W</u> , NMPM, <u>SAN JUAN</u> County			

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>GIANT REFINING CO.</u>	Address (Give address to which approved copy of this form is to be sent) <u>PO BOX 256 FARMINGTON NM 87499</u>		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>EL PASO</u>	Address (Give address to which approved copy of this form is to be sent) <u>PO BOX 990 FARMINGTON NM 87499</u>		
Does well produce oil or liquids, give location of tanks.	Unit <u>34</u>	Sec. <u>30N</u>	Twp. <u>11W</u>
	Is gas actually connected? <u>YES</u>		When <u>JAN 1970</u>

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.

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.

Orville Slaughter
(Signature)
Operator
(Title)
25 January 1985
(Date)

OIL CONSERVATION DIVISION
JAN 25 1985
APPROVED _____, 19____
BY Frank J. [Signature]
SUPERVISOR DISTRICT 3
TITLE _____

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.