

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

P. O. Box 1290, Farmington, New Mexico 87499

New Well	Change in Transporter of:	
Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
Change in Ownership	<input type="checkbox"/> Condensate Gas	<input checked="" type="checkbox"/> Condensate

Other (Please explain)

DESCRIPTION OF WELL AND LEASE

Lease Name McCord		Well No. 11	Pool Name, including Formation Basin Dakota		Kind of Lease State, Federal or Fee	Fed.SF	Lease No. 078212			
Location										
Unit Letter		N	:	990	Feet From The	South	Line and	1550	Feet From The	West
Line of Section		9	Township	30N	Range	13W	NMPM,	San Juan	County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>				P. O. Box 489, Bloomfield, N.M. 87413	
Name of Authorized Transporter of Gasoline Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>				Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company				P. O. Box 990, Farmington, N.M. 87499	
If well produces oil or liquids, use location of tanks.	Unit	Sec.	Twp.	Res.	Is gas actually connected? When
	N	9	30N	13W	Yes

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.

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.

Kenneth E. Roddy
Kenneth E. Roddy (Signature)
Area Production Superintendent
(Title)

10/2/84

(Dear)

APPROVED _____
BY _____
TITLE _____ 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 Section 1. If the item is for sale, give name of owner, well name or number, or tract number, or other such change of condition.

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

OCT 10 1984

OIL CON. DIV.
DIST. 6