STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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1/15/85

(Date)

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL G Operator JAN 2 8 1985 Sun Exploration & Production Company Address OIL CON. DIV. P.O. Box 5940 T.A., Denver, CO 80217 Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Change of operator address Recompletion Oil Dry Gas Change of transporter/cond. Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Well No. | Pool Name, Including Formation Kind of Lease Legae No. State, Federal or Fee New Mexico Federal -N-Federa 1 Basin Dakota Gas S-14210 Location 1190 Feet From The South Line and 1190 west Feet From The 30N Township 12W . NMPM. San Juan Line of Section Range County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate 🚫 Address (Give address to which approved copy of this form is to be sent) Gary Energy Corp. Four Inverness Court East, Englewood, CO 80112
Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas Southern Union Gathering Fidelity Tower, Dallas, TX 75201 Unit Sec. is gas actually connected? If well produces oil or liquids, give location of tanks. М 6 30N: 12W Yes 8-1-63 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. OIL CONSERVATION DIVISION 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. SUPERVISOR DISTRICT # This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened (Sienatwe i well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. Prod. & Pror. Accta <u>Assist</u> All sections of this form must be filled out completely for allow-(Title) able on new and recompleted wells.

completed wells.