

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION 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

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AUG 26 1988
OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator
Hebeco Oil Co.

Address
1509 So. Iron Deming N.M. 88030

Reason(s) for filing (Check proper box)

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

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Sheila</u>	Well No. Pool Name, including Formation <u>#1 Verde Gallup</u>	Kind of Lease State, Federal or Fed <u>Fed</u>	Lease No. <u>SF 080212</u>
Location Unit Letter <u>B</u> : <u>765</u> Feet From The <u>NORTH</u> Line and <u>2160</u> Feet From The <u>EAST</u>			
Line of Section <u>5</u> Township <u>30N</u> Range <u>15W</u> , NMPM, <u>SAN JUAN</u> County			

III. 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 Refinery</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 256 Farmington N.M. 87499</u>
Name of Authorized Transporter of Casinthead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 <u>B</u> Sec. <u>5</u> Twp. <u>30N</u> Rge. <u>15W</u>	Is gas actually connected? <u>NONE</u> When

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.

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.

W.K. Hand
(Signature)
Vice Pres
(Title)
AUG. 26 1988
(Date)

OIL CONSERVATION DIVISION

APPROVED AUG 26 1988
BY Original Signec by FRANK T. CHAVEZ
TITLE 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 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.