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S.O.S.	
AND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-85

TEXACO INC.	
P.O. Box EE, Cortez, CO. 81321	
Person(s) for filing (Check proper box)	Other (Please explain)
Well <input type="checkbox"/>	Previous transporter was Permian, now it is Gary Energy Corp.
Completion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input checked="" type="checkbox"/>

Change of ownership give name  
Address of previous owner

DESCRIPTION OF WELL AND LEASE								
Well Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.				
New Mexico Com M	1	Basin Dakota	State, Federal or Fee State					
Location								
Unit Letter	A	1190' Feet From The	N	Line and 1190' Feet From The	E			
Line of Section	36	Township	31N	Range	12W	NMPM,	San Juan	County

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS						
Signature of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Gary Energy Corp.	115 Inverness Dr., Englewood, CO. 80112					
Signature of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Co.	P. O. Box 1492 El Paso Tx. 79978					
Well produces oil or liquids, location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	A	36	31N	12W	yes	7/8/65

If production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA								
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
ations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
ations	Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full burst)			
First New Oil Run To Tanks	Date of Test	Producing Method (Flow, Pump, Lift, etc.)	
Quality of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

TEST WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Flowing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given is true and complete to the best of my knowledge and belief.		APPROVED _____	
SIGNED A. R. MARX		BY _____	
(Signature)		SUPERVISOR DISTRICT 3	
AREA SUPERINTENDENT		TITLE _____	
(Title)		This form is to be filed in compliance with RULE 1104.	
10/10/86		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.	