STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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MOITUBIRTEID		
SANTA PE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROBATION OFFICE		

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

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

REQUEST FOR ALLOWABLE AND

I.	AUTHORIZATION TO TRANSF	PORT OIL AND NATU	RAL GAS	OIL CON	- 14 AV.
Operator				UiSI	***
A.P.A. Development Corpo	ration				
P.O. Box 215, Cortez, Co	lorado 81321				
Reason(s) for filing (Check proper box)		Other (Please	explain)		
New Well	Change in Transporter of:				
Recompletion	OII Dr	y Gas			
X Change in Ownership	Casinghead Gas Ca	ondensate			
	star Petroleum Corpo	ration, P.O. Bo	x 7379. Alb	uquerque. N	M 87194
II. DESCRIPTION OF WELL AND LE	ASE Well No. Pool Name, including Fo	Otmail on	Kind of Lanes in	<u> </u>	
			Kind of Lease Na	vajo.	Lease No.
Navajo "P"	1 Many Rocks Ga	Llup	0.0.0, , 000.0, 0, 7	-•• 14-20-600-	-13540
	Feet From The North Line	• and <u>610</u>	Feet From The _	West	
Line of Section 35 Township	32N Range	174 , NMPM	San Juan	·	County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil And Or Condensate					
If well produces oil or liquids, Unit	Sec. Twp. Rge. 2 34 32N 17W	is gas actually connects	ed? When		
If this production is commingled with the	it 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		OIL C	ONSERVATION	ABINISION .	
I hereby certify that the rules and regulations of		APPROVED	A		19
been complied with and that the information give my knowledge and belief.	7	1) Oh	~ /		
my knowledge and benet.		13Y	<u> </u>		
		TITLE SUPE	RVISION DIS	TRICT # 5	
Father B Woolin This form is to be filed in compliance with MULE 1104. If this is a request for allowable for a newly drilled or deeper				-	
(Signature) (Desart	7	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.			
(Title)	<i>ω</i> (All sections of this form must be filled out completely for allowable on new and recompleted wells.			
/o -/2- 18 Fill out only Sections I. II. III. and VI for change (Date) well name or number, or transporter, or other such change			iges of owner,		
15-107		T .		filed for each po	