

## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

## ... .. ..... ...... DISTRIBUTION SANTA FE FILE U.B.O.S. LAND OFFICE OIL TRAMSPORTER GAS OPERATOR PROMATION OFFICE

Reason(s) for filing (Check proper box)

II. DESCRIPTION OF WELL AND LEASE

Name of Authorized Transporter of Oil 🔀

Operator

Address

New Well

Lease Name

Location

Navajo

Line of Section

Recompletion

X Change in Ownership

OIL CON. DIV. DIST. 3

| OIL GAS  |   | S            | SANTA FE         | 0. вс<br>, NE <sup>1</sup><br>ST F0 | OX 2088<br>W MEX<br>OR ALLO | ICO 87501  |           | Pormat Page 1                 | 0601-78<br>0601-83 |  |  |
|--|---|--------------|------------------|-------------------------------------|-----------------------------|--|-----------|-------------------------------|--------------------|--|--|
|  |   |              |                  |                                     |                             |  |           |                               |                    |  |  |
| Grand Re   | sources   | Inc.         |                  |                                     | <del></del>                 |  |           |                               |                    |  |  |
| 2250 E. 73rd Street, Suite 400 Tulsa, Oklahoma 74136                               |   |              |                  |                                     |                             |  |           |                               |                    |  |  |
| n<br>wnership  | , , , , , , , , , , , , , , , , , , ,                       | ou           | ransporter of:   | 一                                   | ry Gas<br>ondensate         | Other (Pleas   | e explain | ,                             |                    |  |  |
| oreship give name Robert W. Berry, Inc., 1909 First National Bldg, Tulsa, OK 74103 |   |              |                  |                                     |                             |  |           |                               |                    |  |  |
| JN OF WEL  | T VIAD TE   |              | ool Name, Includ | ding F                              | ormation                    |  | Kind of   | Lease                         | Legse No.          |  |  |
| <del></del>  |   | 4            | Mesa             | Gall                                | up                          |  | State, F  | ederal or Fee Tribal          |                    |  |  |
|  | 1650  | _Feet From T | rh• <u></u>      | Line                                | • and/                      | 1710   | Feet F    | rom The                       |                    |  |  |
| 14   | Township  | 32N          | Range            | . 1                                 | 8W                          | , NMPM   | • <u></u> | San Juan                      | County             |  |  |
| ION OF TR  | ANSPORT   | ER OF OIL    | . AND NATI       | URAL                                | GAS                         |  |           |                               |                    |  |  |
| ed Transporter   | ot OII 🔯  | or Conde     | ensate 🗌         |                                     | Address (                   |  |           | pproved copy of this form i.  |                    |  |  |
|  | ian Corporation Transporter of Casinghead Gas or Dry Gas    |              |                  |                                     |                             | P.O. Box 1183 Houston Texas 77251-1183  Address (Give address to which approved copy of this form is to be sent) |           |                               |                    |  |  |
| None   |   | _            |                  | •                                   | •                           |  |           | pproceed copy by will your to | , is se sear,      |  |  |
| il or liquids,   | Unit  | Sec.         | Twp. Rg          | •.                                  | ls gas ac                   | rually connecte  | d?        | When                          |                    |  |  |
| inks.  |   |              | <u> </u>         |                                     | -                           | No É   | • • •     | 1 Cartara Caraca              | <u> </u>           |  |  |
|  |   |              | ther lease or p  | oool, g                             | give comm                   | ungling order  | number    |                               | <del> </del>       |  |  |
|  | Parts IV and V on reverse side if necessary.  OF COMPLIANCE |              |                  |                                     |                             | OIL CONSERVATION DIVISION .  |           |                               |                    |  |  |

This form is to be filed in compliance with RULE 1104.

tests taken on the well in accordance with RULE 111.

able on new and recompleted wells.

completed wells.

If this is a request for allowable for a newly drilled or despened well, this form must be accompanied by a tabulation of the deviation

All sections of this form must be filled out completely for allow-

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

Form C-104

|  | -   |  | _  | _                                       |  |  |  |  |  |  |  |  |
|--|---|--|--|---|--|--|--|--|--|--|--|--|
| n Corpo  | ration  |  |  |   |  |  |  |  |  |  |  |  |
| Name of Authorized Transporter of Casinghead Gas or Dry Gas  |   |  |  |   |  |  |  |  |  |  |  |  |
| None   |   |  |  |   |  |  |  |  |  |  |  |  |
| llquide,   | Unit  | , Sec.   | Twp.   | Rge.                                    |  |  |  |  |  |  |  |  |
| If this production is commingled with that from any other lease or pool,   |   |  |  |   |  |  |  |  |  |  |  |  |
| 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. |   |  |  |   |  |  |  |  |  |  |  |  |
| (Sign  | he nature)  |  |  |   |  |  |  |  |  |  |  |  |
| Proc   | luction   | Manag  | er   |   |  |  |  |  |  |  |  |  |
| (Title)  |   |  |  |   |  |  |  |  |  |  |  |  |
| 7, 1988  |   |  |  |   |  |  |  |  |  |  |  |  |
| (Date)   |   |  |  |   |  |  |  |  |  |  |  |  |
|  |   |  |  |   |  |  |  |  |  |  |  |  |
|  | ommingled of the information of | ommingled with that is a complete or compl | Insporter of Costnghead Gas   Ione   Identification   Ionit   Sec.   Identification   Sec.   Identification   Ionit   Sec.   Ionit   Sec.   Identification   Ionit   I | Jone Jone Jone Jone Jone Jone Jone Jone |  |  |  |  |  |  |  |  |

If change of ownership give name and address of previous owner Robert W. Berry, Inc.

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS