STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA PE			
FILE			
U.S.G.A.			
LAND OFFICE			
THAMPORTER	OIL		
	GAS		
PERATOR			

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
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator QG-20 Properties Inc.	
Address A.D. Box 496 - 97	Ponoham Merian 79756
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	
Recompletion Oil Dry	Gas
	Indensate Effective 10-1-90
change of ownership give name	O D
nd address of previous owner	and the second of the second o
I. DESCRIPTION OF WELL AND LEASE	
Lease Name Well No. Poul Name, including Fo	Kind of Lease
Location	
Unit Letter J: 1980 Feet From The E Line	and 980 Feet From The Douth
Line of Section // Township 23-9 Range	37 E, NMPM, Sea) County
IL DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Cil So or Condensate	PA Bol 159 Artasin N.M. 886
Name of Authorized/fransporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this (stm is to be sens)
If well produces oil or liquids, Unit Sc. Twp. Rgs.	Is gas actually connected? When $3-19-76$
f this production is commingled with that from any other lease or pool,	give complingling order numbers NA:
NOTE: Complete Parts IV and V on reverse side if necessary.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
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	APPROVED 19 19 19 19 19 19 19 19 19 19 19 19 19
ny knowledge and belief.	DISTRICT I SUPERVISOR
R. J. S. J.	TITLE
(Signalwa)	If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviati
Aboduction Club	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allo

able on new and recompleted wells.

Fitt out only Sections I. II. III, and VI for changes of own; well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiprompleted wells.