STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA PE			
FILE			
U.S.Q.A.			
LAND OFFICE		$l \equiv$	
TAANSPORTER	OIL		
The second second	GAS	·	Ċ.
OPERATOR		[.	
PROBATION OF	I		

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator	Company					
Santa Fe Exploration	1 Company	• • • • • • • • • • • • • • • • • • •				
Address						
P. O. Box 1136, Rosv	well, NM 88202-11	36				
Reason(s) for filing (Check proper box)	· · · ·		Other (Please	explain)	. *	
New Well	Change in Transporter of:				•	•
Becompletion		Dry Gas				
	Casingheod Gas		Effecti	ive 12-1-86		
X Change in Ownership			LITECC	146 12-1-00		
				~~~		
If change of ownership give name Co and address of previous owner	onoco, Inc., P. O.	<u>. Box 460, F</u>	IODDS, NH	88240		<u>.</u>
	1 9/.		· · · ·			
II. DESCRIPTION OF WELL AND I	FASE me. N	ell.		•		
Lease Name	Well No. Pool Name, Incl	uding Formation		Kind of Lease		Lease N
- · · ·		•		State, Federal or Fe	• Endoral	
Langlie Jack Unit		<u>lattix 7 Rvr</u>	S QUEEN			1
Location			•	14 - A.	8911	0089100
Unit Letter F; 1980	Feet From TheNorth	Line and	1980	_ Feet From The	<u>West</u>	
						•
time of Section 20 Towns	hip 24S Rau	⊶ 37E	, NMPM	Lea		Count
Line of Section 20 Towns		<u></u>				
	DEED OF OF AND MA	TTIDAT CAS			i .	
IIL DESIGNATION OF TRANSPO	TI OF CONDENSALE	IUKAL GAS	(Give address)	o which approved co	py of this form is to	obe sent)
Name of Authorized Transporter of Oll	Oc and				·	-
Conoco, Inc. Let 1/1	7. Lepeline		Box 1267	SPonca City,	<u>-0K-/4503</u>	
Name of Authorized Transporter of Couler	nead Gos or Dry Gas	Address	(Give address i	to which approved co	py-of this form is to	s de sent)
El Paso Natural Gas Com	pany	<u> </u>	Box 1492.		<u>79978</u>	
	nit Sec. Twp.		ctually connecto	ed? When		
If well produces off or liquids, give location of tanks.	G 20 245	~ 37E	es	1		<u> </u>

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.

MI (Signature) Production Clerk (Tille) January 29 1987 (Date)

		SION
APPROVED	FEB 1 1 1987	
BY	Orig. Signed by Paul Kautz	· · · · · · · · · · · · · · · · · · ·
TITLE	Geologist	

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

If this is a request for allowable for a newly drilled or deeps well, this form must be accompanied by a tabulation of the devia tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all able on new and recompleted wells.

Fill out only Sections I. II. III. and VI for changes of ow well name or number, or transporter, or other such change of condit

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

