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| TRANSPORTER            | OIL | 1 |
|                        | GAS |   |
| OPERATOR               |     |   |
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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 1-1-65

B.R.

|   |   |
|---|---|
| Operator<br>Rijan Oil Company, Inc.                                 |   |
| Address<br>20 First Plaza, Suite 402, Albuquerque, New Mexico 87102 |   |
| Reason(s) for filing (Check proper box)                             | Other (Please explain)  |
| New Well <input checked="" type="checkbox"/>                        | Change in Transporter of:   |
| Recompletion <input type="checkbox"/>                               | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>               |
| Change in Ownership <input type="checkbox"/>                        | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

|   |               |   |   |                      |
|---|---------------|---|---|----------------------|
| Lease Name<br>PLR, Inc.   | Well No.<br>1 | Pool Name, Including Formation<br>Undesignated Gallup est | Kind of Lease<br>State, Federal or Fee<br>Federal | Lease No.<br>NM26655 |
| Location  |               |   |   |                      |
| Unit Letter L : 760 Feet From The West Line and 1650' Feet From The south |               |   |   |                      |
| Line of Section 23 Township 19 North Range 3 West, NMPM, Sandoval County  |               |   |   |                      |

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|   |  |            |             |            |                                  |      |
|---|--|------------|-------------|------------|----------------------------------|------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/><br>Continental Oil Company | Address (Give address to which approved copy of this form is to be sent)<br>1755 Glenarm Place, Denver, Colorado 80202 |            |             |            |                                  |      |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/><br>None                       | Address (Give address to which approved copy of this form is to be sent)   |            |             |            |                                  |      |
| If well produces oil or liquids,<br>give location of tanks.   | Unit<br>L  | Sec.<br>23 | Twp.<br>19N | Rge.<br>3W | Is gas actually connected?<br>No | When |

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

COMPLETION DATA

|   |  |                                   |                                   |                                   |                                 |                                    |                                      |                                       |
|---|--|-----------------------------------|-----------------------------------|-----------------------------------|---------------------------------|------------------------------------|--------------------------------------|---------------------------------------|
| Designate Type of Completion - (X)  | Oil Well <input checked="" type="checkbox"/> | Gas Well <input type="checkbox"/> | New Well <input type="checkbox"/> | Workover <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug Back <input type="checkbox"/> | Same Res'v. <input type="checkbox"/> | Diff. Res'v. <input type="checkbox"/> |
| Date Spudded<br>3-22-77   | Date Compl. Ready to Prod.<br>6-15-77        | Total Depth<br>3250'              | P.B.T.D.<br>3195'                 |                                   |                                 |                                    |                                      |                                       |
| Elevations (DF, RKB, RT, GR, etc.)<br>6764' GR, 6772' KB  | Name of Producing Formation<br>Gallup        | Top Oil/Gas Pay<br>2696'          | Tubing Depth<br>3183'             |                                   |                                 |                                    |                                      |                                       |
| Perforations<br>2696-2708', 2716-2724', 2890-2896', 2984-2990',<br>3034-3040', 3044-3048', 3118-3124', 3146-3160', 3172-3178' |  | Depth Casing Shoe<br>3250'        |                                   |                                   |                                 |                                    |                                      |                                       |
| TUBING, CASING, AND CEMENTING RECORD  |  |                                   |                                   |                                   |                                 |                                    |                                      |                                       |
| HOLE SIZE   | CASING & TUBING SIZE                         | DEPTH SET                         | SACKS CEMENT                      |                                   |                                 |                                    |                                      |                                       |
| 10-3/4"   | 8-5/8"                                       | 126'                              | 80 sx C1 A, 2 1/2 cc, cire.       |                                   |                                 |                                    |                                      |                                       |
| 7-7/8"  | 5-1/2"                                       | 3250'                             | 375 sx 50/50 Posmix               |                                   |                                 |                                    |                                      |                                       |
|   | 2-3/8"                                       | 3183'                             |                                   |                                   |                                 |                                    |                                      |                                       |

TEST DATA AND REQUEST FOR ALLOWABLE  
OIL 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 24 hours)

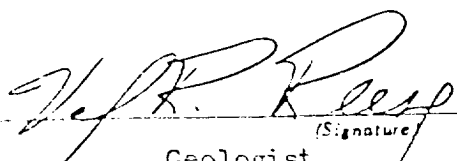
|  |                         |   |                  |
|--|-------------------------|---|------------------|
| Date First New Oil Run To Tanks<br>6-15-77 | Date of Test<br>6-15-77 | Producing Method (Flow, pump, gas lift, etc.)<br>Pump |                  |
| Length of Test<br>24 hrs                   | Tubing Pressure         | Casing Pressure                                       | Choke Size<br>2" |
| Actual Prod. During Test                   | Oil-Bbls.<br>15         | Water-Bbls.<br>2 (frac water)                         | Gas-MCF<br>TSTM  |

GAS WELL

|                                  |                           |                           |                       |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D          | Length of Test            | Bbls. Condensate/MMCF     | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size<br>1 1/2"  |

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation  
Commission have been complied with and that the information given  
above is true and complete to the best of my knowledge and belief.

  
Geologist  
June 17, 1977  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED JUL 1 1977  
BY ORIGINAL SIGNED BY N. E. MAXWELL, JR.  
TITLE PETROLEUM ENGINEER DIST. NO. 3

This form is to be filed in compliance with RULE 1104.  
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 allow-  
able on new and recompleted wells.  
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  
completed wells.