

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

|                        |     |
|------------------------|-----|
| NO. OF COPIES RECEIVED |     |
| DISTRIBUTION           |     |
| SANTA FE               |     |
| 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 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator

Fina Oil And Chemical Company

Address

1625 Broadway, Suite 1600 Denver, Colorado 80202

Reason(s) for filing (Check proper box)

☐ New Well ☐ Change in Transporter of: ☐ Oil ☐ Dry Gas

☐ Recompletion ☐ Casinghead Gas ☐ Condensate

☐ Change in Ownership

Other (Please explain)

Operator Name Change

If change of ownership give name and address of previous owner

American Petrofina Company of Texas, 1625 Broadway, Suite 1600  
Denver, Colorado 80202 Effective July 1, 1985

II. DESCRIPTION OF WELL AND LEASE

|                 |          |                                                          |                               |            |
|-----------------|----------|----------------------------------------------------------|-------------------------------|------------|
| Lease Name      | Well No. | Pool Name, including Formation                           | Kind of Lease                 | Lease No.  |
| Bolack "B"      | 1        | Ballard Pictured Cliffs                                  | State, Federal or Fee Federal | 82-080594A |
| Location        |          |                                                          |                               |            |
| Unit Letter     | 0        | 990 Feet From The South Line and 1750 Feet From The East |                               |            |
| Line of Section | 1        | Township 24N Range 6W NMPM Rio Arriba                    | County                        |            |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

6666 GL

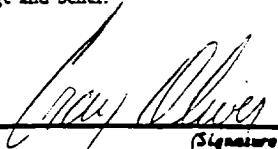
|                                                                                                                          |                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>                    | Address (Give address to which approved copy of this form is to be sent) |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| El Paso Natural Gas Company                                                                                              | P. O. Box 1492, El Paso, TX 79978                                        |
| If well produces oil or liquids, give location of tanks.                                                                 | Is gas actually connected? When                                          |

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

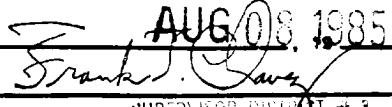
NOTE: Complete Parts IV and V on reverse side if necessary.

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.

  
(Signature)  
Administrative Manager  
(Title)  
July 23, 1985  
(Date)

OIL CONSERVATION DIVISION

APPROVED  AUG 08 1985  
BY  
SUPERVISOR DISTRICT # 3  
TITLE

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 allowable 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.