Submit 3 Copies to Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Well API No.
Snyder Oil Corporation	30-039-22055

Address: 1625 Broadway, Suite 2200, Denver, Co 80202

Reason(s) for Filing (Check proper box)

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

Recompletion ☐ Casinghead Gas ☐ Condensate ☐

Change in Operator ☐ Other (Please explain): Trans Chge only

EFFECTIVE DATE 11/1/93

If change of operator give name and address of previous operator: Amoco Production Co., P.O. Box 800, 1670 E. Mojave, Farmington, N.M. 87401

II. DESCRIPTION OF WELL AND LEASE

39189

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease (State, Federal or Fee)	Lease No.
Jicarilla 12257	101	Lindrith Gallup Dakota, West		JICT11

Location: Unit Letter A : 750 Feet From The North Line and 990 Feet From The East Line

Section 5 Township 24N Range 4W NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Giant Refining Company 48 7810	P. O. Box 256, Farmington, N. M. 87499
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company 48 7830	P. O. Box 4990, Farmington, N. M. 87499

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?
	A	5	24N	4W	Yes	

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

IV. COMPLETION DATA

48 7850

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL

(Test must be after recovery of total volume of load oil and must equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

RECEIVED
NOV 15 1993
OIL CON. DIV.
DIST. 3

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Kay S. Eckstein

Signature

KAY S. ECKSTEIN ENGINEERING TECH.

Printed Name Title

11/12/93 (505) 632-8056

Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved NOV 15 1993

By Bill Olson

Title SUPERVISOR DISTRICT #3