

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
CENTRAL RESOURCES, INC. Well API No. 3003906552  
Address 1776 LINCOLN STREET STE. 1010, DENVER, COLORADO 80203  
Reason(s) for Filing (Check proper box)  Other (Please explain)  
New Well  Change in Transporter of:  
Recompletion  Oil  Dry Gas   
Change in Operator  Casinghead Gas  Condensate   
If change of operator give name and address of previous operator National Cooperative Refinery Association, PO Box 1404, McPherson, KS 67460

II. DESCRIPTION OF WELL AND LEASE  
Lease Name Candado Well No. 2 Pool Name, including Formation Blanco Pictured Cliffs, So. Kind of Lease State, (Federal) or Fee Lease No. SF079161  
Location Unit Letter P : 990 Feet From The South Line and 990 Feet From The East Line  
Section 9 Township 26N Range 7W, NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil  or Condensate  Gary-Williams Energy Corp. Address (Give address to which approved copy of this form is to be sent) 370 17th Street, Ste. 5300, Denver, CO. 80202  
Name of Authorized Transporter of Casinghead Gas  or Dry Gas  El Paso Natural Gas Address (Give address to which approved copy of this form is to be sent) PO BOX 1492, El Paso, TX. 79978  
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When? yes 1955

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

IV. COMPLETION DATA  
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, RI, 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 be equal to or exceed top allowable for this depth to be for full 24 hours.)  
Date First New Oil Run To Tank Date of Test Producing Method (Flow, Pump, etc.)  
Length of Test Tubing Pressure Casing Pressure Choke Size  
Actual Prod. During Test Oil - Bbls. Water - Bbls. Gas - MCF

GAS WELL  
Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MNCF Gravity of Condensate  
Testing Method (pilot, 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.  
Signature Scott A. Smith V.P. Operations/  
Printed Name Title Engineering  
Date 7/31/93 (303) 830-0100 Telephone No.

OIL CONSERVATION DIVISION  
AUG 16 1993  
Date Approved  
By Supervisor District 13  
Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 110-1  
1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.  
2) All sections of this form must be filled out for allowable on new and recompleted wells.  
3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.  
4) Separate Form C-104 must be filed for each pool in multiply completed wells.