Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

| | L AND NATURAL GAS |
|---|--|
| | Weil API No. |
| Openior Snyder Oil Corporation | 665500 |
| Address 1801 California St. Ste 3500, Denver | , CO 80202 |
| Reason(s) for Filing (Check proper box) | Other (Please explain) |
| New Well Change in Transporter of: | _ |
| Recompletion Oil Dry Gas | |
| Change in Operator | |
| If change of operator give name Columbus Energy Corp and address of previous operator | . P.O. Box 2038, Farmington, NM 87499 |
| II. DESCRIPTION OF WELL AND LEASE | ding Formation Kind of Lease Lease No. |
| Lease Name Well No. Pool Name, Inclu | |
| TRIBAL C 0/ Basin D | akota Jicarilla 09-000097 |
| Unit Letter M : 790 Feet From The South Line and 1190 Feet From The West Line | |
| Section 06 Township 26N Range 0 | 3W , NMPM, RIO ARRIBA County |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NAT | URAL GAS |
| Name of Authorized Transporter of Oil or Condensate | Address (Give address to which approved copy of this form is to be sent) |
| Giant Refinery | P.O. Box 256, Farmington, NM 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) |
| Northwest Pipeline Corp. | 3935 E. 30th St., Farmington, NM 87 |
| If well produces oil or liquids, Unit Sec. Twp. Rg | |
| give location of tanks. M 106 26N 03 | W Yes I |
| If this production is commingled with that from any other lease or pool, give commin | |
| VI. OPERATOR CERTIFICATE OF COMPLIANCE | OIL CONSERVATION DIVISION |
| I hereby certify that the rules and regulations of the Oil Conservation | OIL CONSERVATION DIVISION |
| Division have been complied with and that the information given above | PENVIC anno |
| is true and complete to the best of my knowledge and belief. | Date Approved |
| \sim 1 . 1 | 1 |
| Similatizaca bymene by Ahr | By |
| Patricia Tognoni Engr Tech | |
| Printed Name Title | Title Current State Control of the C |
| 10/01/90 303-292-9100 | |
| Date Telephone No. | 11 |

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 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.

