

DISTRIBUTION
 SANTA FE
 FILE
 U.S.G.S.
 LAND OFFICE
 TRANSPORTER
 OIL
 GAS
 OPERATOR
 PRORATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
 REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
 Supersedes Old C-104 and
 Effective 1-1-65

I. Operator
 CONSOLIDATED OIL & GAS, INC.
 Address
 1860 Lincoln Street, Lincoln Tower Bldg., Denver, Colorado 80203
 Reason(s) for filing (Check proper box)
 New Well ☐ Change in Transporter of:
 Recompletion ☐ Oil ☐ Dry Gas ☒
 Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
 Lease Name Hoyt Well No. 1 Pool Name DAKOTA
 Location
 Unit Letter H : 1720 Feet From The N Line and 850 Feet From The E
 Line of Section 5 , Township 26 Range 4 , 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)
 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 Corporation 501 Airport Drive
 Farmington, New Mexico 87401
 If well produces oil or liquids, give location of tanks. Unit H Sec. 5 Twp. 26 Rge. 4 Is gas actually connected? Yes When 5-5-64

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)
 Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.
 Pool 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 or be for full 24 hours)
 Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)
 Length of Test Tubing Pressure Casing Pressure
 Actual Prod. During Test Oil - Bbls. Water - Bbls.

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

VI. 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.
 Approved FEB 7 1974
 BY Original Signed by Emery C. Arnold
 TITLE SUPERVISOR DIST. #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 data taken on the well in accordance with RULE 1111.
 All sections of this form must be filled out completely for all wells on new and re-completed wells.
 Signature: Geraldine Bergamo
 Asst. Production Acct.
 Date: June 24, 1974