

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	
FORMATION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator: Silvridge Corporation

Address: 8101 NW 10th, Okla. City, OK 73127

Reason(s) for filing (Check proper box):

☐ New Well ☐ Change in Transporter of:

☐ Recompletion ☐ Oil ☐ Dry Gas

☒ Change in Ownership ☐ Casinghead Gas ☐ Condensate

Other (Please explain): Change of Operator to be effective May 16, 1985

If change of ownership give name and address of previous owner: Edwards & Leach Oil Company
501 NW Expwy, Suite 600, Okla. City, OK 73118

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Johnston Shear</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Blanco Mesaverde</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No.
Location				
Unit Letter <u>H</u>	<u>1850</u>	Feet From The <u>North</u>	Line and <u>790</u>	Feet From The <u>East</u>
Line of Section <u>3</u>	Township <u>26N</u>	Range <u>3W</u>	<u>NMPM, Rio Arriba</u> County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Giant Refining</u>	<u>P.O. Box 256, Farmington, NM 87499</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Northwest Pipeline Corp.</u>	<u>P.O. Box 8900, Salt Lake City, Utah 84108</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? <u>Yes</u> When <u>2-4-59</u>

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.

Paul H. Nguyen
(Signature)

Production Clerk

(Title)

August 12, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED

BY

TITLE

SUPERVISOR DISTRICT # 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 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 multiple completed wells.