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

DIZIBICII

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., Azzec, NM 87410

P.O. Drawer DD, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	TO TR	ANSPORT OIL	AND NATURAL GAS		
Operator Snyder Oil Corpora			Well API No. 2161000		
Address 1801 California St	. Ste 3500), Denver,			
Reason(s) for Filing (Check proper box)		_	Other (Please explain)		
New Well		a Transporter of:			
Recompletion	Oil L	Dry Gas			
Change in Operator	Casinghead Gas		P.O. Box 2038	Farmingto	n. NM 87499
f change of operator give name ond address of previous operator	Tumbus Ene	ergy corp.	P.O. BOX 2038	, raniminguo	1, 1411 07433
	ANDIFACE				
I. DESCRIPTION OF WELL	Well No.	Pool Name, Includes	g Formation	Kind of Lease	Lease No.
Lease Name JICARILLA BAA	IA	Blanco Me		Jicarilla	09-000106
		1 - 1 - 1 - 1			
Location (2)	845	S	outh Line and 1065	Feet From The	EastLine
Unit Letter	_:	_ rest from the			
Section 26 Townshi	in 26N	Range 04	N . NMPM. R	IO ARRIBA	County
<u> </u>					
III. DESIGNATION OF TRAN	ISPORTER OF (OIL AND NATU	RAL GAS Address (Give address to which a	and some of this form	n ie to he tent)
Name of Authorized Transporter of Oil	or Conde	ensate 📉	Address (Give address to which a		
Giant Refinery			P.O. Box 256,	Farmington,	NM 87499
Name of Authorized Transporter of Casin	ghead Gas	or Dry Gas 💹	Address (Give address to which a		
Gas Company of			P.O. Box 1899,	Bloomfield Whea!	, NM 87413
If well produces oil or liquids,	Unit Sec.	Twp. Rge.	Is gas actually connected?	Wiles:	
give location of tanks.			Yes	<u> </u>	
If this production is commingled with that			ng order number:		
VI. OPERATOR CERTIFIC			OIL CONSERVATION DIVISION		
I hereby certify that the rules and regu	lations of the Oil Cons	ervation			
Division have been complied with and	that the information gi	ives above	NOV 2 6 1990		
is true and complete to the best of my	Enowledge and belief.		Date Approved	1101	20 1220
Patricia Ja	icui MacM	11	By	3.4	0
Signature Patricia Togi	non i Eng		SUPERVISOR DISTRICT 40		
Printed Name 10/01/90		Title -292-9100	Title		TOISTRICT PS
Data	Tr	elephone 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.

