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

DISTRICT II

## 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

P.O. Drawer DD, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I. TO TRANSPORT OIL.	
Operator	Weil API No.
Snyder Oil Corporation	2213000
Address	
1801 California St. Ste 3500, Denver,	CO 80202
Reason(s) for Filing (Check proper box)  Other (Please explain)	
New Weil Change in Transporter of:	
Recompletion Oil Dry Gas	
Change in Operator	
	P.O. Box 2038, Farmington, NM 87499
and address of previous operator	
W DECOMPTON OF WELL AND LEASE	
II. DESCRIPTION OF WELL AND LEASE  Lease Name Well No.   Pool Name, Including	Formation Kind of Lease Lease No.
1 + 66'	
11.23.12.3	ota breatifia by coost
Location	
Unit Letter B: 850 Feet From The No	rth Line and 1665 Feet From The East Line
	0.70 100701
Section 07 Township 26N Range 03W	, 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)
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
	Is gas actually connected? When ?
give location of tanks. IR 107 26N 03W	Yes
If this production is commingled with that from any other lease or pool, give commingling order number:	
VI. OPERATOR CERTIFICATE OF COMPLIANCE	
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	
is true and complete to the best of my knowledge and belief.	Date ApprovedNOV 2 8 1990
	Date Approved
Gatrini Lancui by Sum	Λ .
Simone	By
Signature Patricia Tognoni Engr Tech	
Printed Name Title	Title SUPERVISOR DISTRICT #3
10/01/90 303-292-9100	11110
Date Telephone No.	

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.