

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

|                        |                                                              |
|------------------------|--------------------------------------------------------------|
| NO. OF COPIES REQUIRED |                                                              |
| DISTRICT OFFICE        |                                                              |
| SANTA FE               |                                                              |
| FILE                   |                                                              |
| U.S.G.A.               |                                                              |
| LAND OFFICE            |                                                              |
| TRANSPORTER            | <input type="checkbox"/> OIL<br><input type="checkbox"/> GAS |
| OPERATOR               |                                                              |
| REGULATORY OFFICE      |                                                              |

OIL CONSERVATION DIVISION  
P. O. BOX 2038  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-79  
Formal 08-01-83  
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REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

|                                                                                                                            |                                                                                                                                                                             |
|----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Operator<br>Columbus Energy Corporation (Formerly Consolidated Oil & Gas, Inc.)                                            |                                                                                                                                                                             |
| Address<br>P.O. Box 2038, Farmington, New Mexico 87499                                                                     |                                                                                                                                                                             |
| Reason(s) for filing (Check proper box)                                                                                    | Other (Please explain)                                                                                                                                                      |
| <input type="checkbox"/> New Well<br><input type="checkbox"/> Recompletion<br><input type="checkbox"/> Change in Ownership | Change in Transporter of: Y<br><input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas<br><input type="checkbox"/> Commingled Gas <input type="checkbox"/> Condensate |

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

|                                 |               |                                                    |                                        |                        |
|---------------------------------|---------------|----------------------------------------------------|----------------------------------------|------------------------|
| Lease Name<br>TRIBAL C 6E       | Well No.      | Pool Name, including Formation<br>Wildhorse Gallup | Kind of Lease<br>State, Federal or Fee | Lease No.<br>Jicarilla |
| Location<br>Unit Letter M : 815 | Foot From The | South                                              | 790                                    | Foot From The West     |
| Line of Section 5               | Township 26N  | Range 03W                                          | Rio Arriba                             |                        |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|                                                                                                                          |                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>                    | Address (Give address to which approved copy of this form is to be sent) |
| Giant Refining Company                                                                                                   | P.O. Box 256, Farmington, NM 87499                                       |
| Name of Authorized Transporter of Commingled Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| Columbus Energy Corp.                                                                                                    | P.O. Box 2038, Farmington, NM 87499                                      |
| If well produces oil or liquids, give location of tanks.                                                                 | Unit : M : 5 : 26N : 03W                                                 |
| Is gas actually commingled?                                                                                              | Yes                                                                      |
|                                                                                                                          | 5/7/86                                                                   |

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.

Key Eckstein  
(Signature)  
Engineering Technician  
(Title)  
12/30/86  
(Date)

OIL CONSERVATION DIVISION

APPROVED \_\_\_\_\_ 1987  
BY \_\_\_\_\_  
TITLE \_\_\_\_\_ SUPERVISOR DISTRICT 2

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 multiply completed wells.