STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

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0 IST R ID UT 188		
BANTA FE	$oxed{\Box}$	

W.D.O.L		
LAMO OFFICE		
TRANSPORTER OIL		
948	1	
0PERATOR		
PROBATION OFFICE	<u> </u>	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE

AUTHORIZATION TO TRANSPORT OIL AND NATURAL CAS

Form C-104 Revised 10-01-78 Format 08-01-83 Page 1

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COLUMBUS ENERGY CORPORATION		Language Control				
P.O. BOX 2038, I	FARMINGTON, NEW ME	XICO 87499				
Reason(s) for filing (Check proper box,	, 		Other (Please	expiaia)		
New Well Change in Transporter of:		Change of Operator				
Recompletion	<u></u> ou	Dry Gas	(From Union Texas Petroleum Corporation)			
Change In Ownership	Casingbook Gas	Condensate				
I change of ownership give name and address of previous owner	O TEACE					
I. DESCRIPTION OF WELL AND		nciuding Formation		King of Lease		Leges No.
		•		Charles Made and an Man	[
NEWSON\ "C"	3 BALLAKD	PICTURED CLI	FFS	State, Federal or Fee	FEDSE	078384
Unit Letter M : 800	Feet From The SOU	TH_Line and		Feet From The W	EST	County
II, DESIGNATION OF TRANSP						
Name at Authorized Transporter at Cil	or Condensate	Andress	(Give address u	which approved copy of	this jorn is to	be sent)
Name of Authorized Transporter of Cas		Address	(Give address tt	which approved copy of	this form is to	oe sentj
GAS COMPANY OF NEW ME				BLOOMFIFLD, NEW	MEXICO	87413
If well produces oil or liquids, give location of tanks.	M 9 26N	Res. Is gas as	TURLLY CONNECTED YPS	17 When		
this production is commingled wit	<u> </u>	or pool, give com	ningling order	numberi		
NOTE: Complete Parts IV and V	on reverse side if necess	<i>ary.</i> 				

TITLE

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.

Cays. Expeller

PRODUCTION & DRILLING TECHNICIAN

September 17, 1987

VI. CERTIFICATE OF COMPLIANCE

(Dese)

This form is to be filed in compliance with RULE 1104.

OIL CONSERVATION DIVISIO

If this is a request for silowable 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.

SUPERVISOR DISTRICT # 3

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections L. II. III. and VI for changes of owner, well name or number, or transportation other such change of condition.

Separate Forms C-104 must be filled for each pool in multiply completed wells.