Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Michical Energy, Minerals and Natural Resources Department

Revised 1-1-89 See Instruction at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II P.O. Drawer DD, Antesia, NM 88210 REQUEST FOR ALLOWABLE AND AUTHORIZATION DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 TO TRANSPORT OIL AND NATURAL GAS Well API No. 30-045-87286-00 Operator Snyder Oil Corporation (303)
Other (Please explain) 292-9100 Address 1801 California St., Suite 3500; Denver, CO 80202 Reason(s) for Filing (Check proper box) Change in Transporter of New Well Dry Gas Casinghead Gas Condensate Recompletion Change in Operator لیا Snyder Oil Company (Address same as above) If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Lease No. Kind of Lease Pool Name, Including Formation State, Federal or Fee Well No. none Lease Name Basin Dakota Kaempf Feet From The South Line and 1,450 Feet From The West Location 790__ Unit Letter ____N County San Juan , NMPM, Range 11 W Township 30 N Section 19 III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Oil PO Box 1429; Aztec, NM 87413 Address (Give address to which approved copy of this form is to be sent) or Dry Gas Name of Authorized Transporter of Casinghead Gas PO Box 1492; ElPaso, TX 79978 El Paso Natural Gas When? Is gas actually connected? Rge. Twp. Unit If well produces oil or liquids, N/A Yes | 30N | 11W 19 N give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: Diff Res'v Plug Back | Same Res'v IV. COMPLETION DATA Deepen New Well Workover Gas Well Oil Well Designate Type of Completion - (X) P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Spudded Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE '. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.) OIL WELL Date of Test Date First New Oil Run To Tank Casing Pressure Tubing Pressure JUE 2 1990 Length of Test Water - Bbls. OIL CON. DIV Oil - Bbls. Actual Prod. During Test Bbls. Condensate/MMCF **GAS WELL** Length of Test Actual Prod. Test - MCF/D Choke Size Casing Pressure (Shut-in) Tubing Pressure (Shut-in)

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Testing Method (pitot, back pr.)

is true and complete to the best of my	Enough
Patricia a Yoga	Oni
Signature	Engineering Technician
Patricia A. Tognoni	Title
Printed Name	203-292-9100
6-28-90	Telephone No.
Date	

OIL CONSERVATION DIVISION

AUG 03 1990 Date Approved ___

ORIGINAL SIGNED BY ERNIE BUSCH By_

Title DEPUTY OIL & GAS INSPECTOR, DIST. #3

- 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
- 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.