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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

## OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

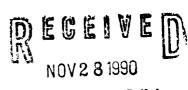
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

' <u>.</u>	neuc	TO TRA			AND NATURAL GAS	011		
Operator Snyder Oil Corporation						Well API No. 2595300		
Address 1801 California St	. Ste	3500	, Denv	ær,				
Reason(s) for Filing (Check proper box)	_				Other (Please explain)			
New Well		Change in	Transporter	of:				
Recompletion	Oil		Dry Gas	$\Box$				
Change in Operator	Casinghe		Condensate	_				
f change of operator give same and address of previous operator	Tumbu	is Ene	rgy Co	orp.	P.O. Box 2038,	Farmingtor	n, NM 87499	
II. DESCRIPTION OF WELL AND LEASE								
PAYNE 3E W:t No. Pool Name, Including Basin Dal					Kind of Lease Federal	Less No. 82-078464		
Location  Unit Letter D								
Section 26 Townshi	, 31	N	Range	131	N , NIMPM, SA	AN JUAN	County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS								
Name of Authorized Transporter of Oil		or Coade		7	Address (Give address to which ap	oproved copy of this form	s is to be sent)	
Giant Refinery					P.O. Box 256, Farmington, NM 87499			
Name of Authorized Transporter of Casinghead Gas or Dry Gas X					Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Company P.O. Box 4990, Farmington, NM 8749								
If well produces oil or liquids,	Unit	Sec.	Twp	Rge.	is gas actually connected?	When?		
give location of tanks.	İD	26	131NL	1.3W	Yes	10/25/85		
If this production is commingled with that	from any o	ther lease or	pool, give o	mmingli				
VI. OPERATOR CERTIFIC	ATE O	F COM	PLIANC		1	RVATION D	IVISION	
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.  The street of the best of my knowledge and belief.					NOV 2 8 1990			
					Date Approved			
					Ву	کاست (مسلم		
Signature Patricia Togi	non i	Engr	Tide		S	UPERVISOR DIS	STRICT #3	
10/01/90			-292-9	100	Title			
Date		Tel	lephone 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.



OIL CON. DIV.