STATE OF NEW MUXICO Form C-104 Revised 10-1-78 HERGY AND MILLERALS DEPARTMENT OIL CONSERVATION DIVISION ** ** (**** ***** CHET MINUTION P. O. HOX 2088 SANTATE SANTA FE, NEW MEXICO 87501 LAND OFFICE REQUEST FOR ALLOWABLE DIL TRANSPORTER AND GAE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS OPERATOR PROBATION OFFICE I. Operator Monsanto Company Suite 500, 700 South Colorado Boulevard, Denver, Colorado 80222
Reason(s) for filing (Check proper box)
Other (Please explain) New Woll Change in Transporter of: Addition of transporter for Dry Gas Oil condensate Recompletion Condensate Change in Ownership If change of ownership give name and address of previous owner ____ I. DESCRIPTION OF WELL AND LEASE
| Well No. | Pool Name, Including Formation API 30-045-24994 Kind of Lease Lease No. State, Federal or Fee Fee 1-A Blanco Mesaverde Montoya Com Location 1190 South 990 Feet From The East Line and Unit Letter 32 North Range 13 West , NMPM, San Juan County 25 Township 1. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| Name of Authorized Transporter of Oil | or Condensate | X | Address (Give address to which approved copy of this form is to be sent) 4775 Indian School Road N.E., Plateau, Inc. Albuquerque New Mexico 87110
Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas _____ or Dry Gas ____ When Sec. Roe. Is gas actually connected? If well produces oil or liquids, give location of tanks. Р 25 ·13W 32N If this production is commingled with that from any other lease or pool, give commingling order number: Not applicable V. COMPLETION DATA Same Res'v. Diff. Res'v. Workover Deepen Plug Bock Designate Type of Completion - (X) Total Depth P.B.T.D. Date Compl. Ready to Prod. Top Oll/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE HOLE SIZE (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks Choke Size Casing Pressure Tubing Pressure Length of Test Gas - MCF Water - Bble. Oil-Bbls. Actual Prod. During Test GAS WELL Bbls. Condensate/MMCF Gravity of Condensate Length of Test Actual Frod. Tost-MCF/D Cosing Pressure (Shut-in) Choke Size Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) OIL CONSERVATION DIVISION T. CERTIFICATE OF COMPLIANCE JUL 28 1982 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. **电影响 数 电影** 电影 SUPERVISOR DISTRICT # 3 This form is to be filed in compliance with RULE 1104. If this is a request for silowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with BULE 111. K. J. Ebner All sections of this form must be filled out completely for allowable on new and recompleted wells. Regional Production Manager (Title) 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. July 27, 1982 Triporate Torms C-104 must be filled for each pool in multiply that I write (Date)