STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

98. 8F 48FI48 844	Т		١	
DISTRIBUTI	1	T-	•	
BANTA FE	1		•	
FILE		1	•	
U.B.G.B.		_	•	
LAND OFFICE		_		
TRANSPORTER	OIL			
	BAD			
OPERATOR				
PROBATION OF			ı	

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE AND

Ī.	AUTHOR	IZATION	IU IKAN	SPURT UI	L AND NA I	UKAL G	AS		
Operator			·	-					
Circle Ridge Production	Inc.								
Address					·				
c/o Oil Reports & Gas Se	rvices	Inc. P	. O Bo	× 755	Hobbe N	IM 883	24.1		
Reason(s) for filing (Check proper box)	,			, , , ,	Other (Plea				
New Well	Change in	Transporte	r of:				•		
Recompletion	Oii			Dry Gas Effective 11/1/86					
X Change in Ownership	Casir	nghead Gas	T i	Condensate		1	rrective	11/1/00	
					l				
If change of ownership give name	eat West	ern Dri	la Co	P O	Row 1650	Miai	and, TX	79701	
and address of previous ownerGI	cae west	CIII DI	ig. co.	1.0.	DOX 1033	, miui	and, IA	79701	
II. DESCRIPTION OF WELL AND I	FACE								
Lease Name		Pool Name,	Including I	Cormation		Kind of	Lease		Legse No.
Rock Queen Unit Sec 30	14	C	.l. O			State. I	Federal or Fee	_	_
Location		Caproc	k Quee	<u>n</u>		1		State	B-11332
V (60)			. 4.1.	1	770			T7	
Unit Letter N : 660	Feet Fron	n The <u>501</u>	TEU LI	ne and!	770	Feet	From The	West	
Line of Section 30 Townsh	u n	135	Danca 2.	- 37	- , NMP			_	_
200 01 00011011 30 1001101		133	Hande	IE J	, NMP	м,		Lea	County
III. DESIGNATION OF TRANSPOR	TER OF C	III AND !	VATTIRA	T GAS					
Name of Authorized Transporter of Cil	or Co	ndensate [Give address	to which	approved copy o	of this form is i	o be senti
None - Injection		_	_				**		
Name of Authorized Transporter of Casings	nead Gas	or Dry C	as 🗍	Address (Give address	to which	approved copy o	f this form is i	a he sensi
	_			,				, ,	
	ii Sec.	Twp.	Rge.	Is gas act	ually connec	1ed?	When		
If well produces oil or liquids,			1				1		
<u> </u>			 						·
If this production is commingled with the	at from any	other less	e or pool,	give comm	ingling orde	r number	:		
NOTE: Complete Parts IV and V on	reverse siu	le if neces	sary.						
			,	11					
VI. CERTIFICATE OF COMPLIANCE			OIL CONSERVATION DIVISION						
I hereby certify that the rules and regulations o	f the Oil Con	servation Dis	vision have	45550		NOW T	9 1986	•	
been complied with and that the information give				APPRO			_ - 1000 -		19
my knowledge and belief.		•	i	BY	APIGIA	iai nor	150 BY JERRY	SOMON	
					4.14.	METRIC	* : \$B\$P\$\$P\$\$P\$	O#	
				TITLE.			 -		
la	1/		•	This form is to be filed in compliance with MULE 1104.					
This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or d									
(Signature)			ĺ	well, thi	s form must	be acco	mpanied by a	tabulation of	the deviation
Agent				1			ccordance wit		
(Title) 11-13-86			able on	All sections of this form must be filled out completely for allowable on new and recompleted wells.					
				Fill	out only 9	ections	I. II. III. and	VI for chang	es of owner
(Date)			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.

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