

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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| TRANSPORTER            | OIL |
|                        | GAS |
| OPERATOR               |     |
| PRODUCTION OFFICE      |     |

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

**OIL CONSERVATION DIVISION**  
**DEPT. OF ENERGY**

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

|  |   |
|--|---|
| Operator<br>NM&O OPERATING COMPANY   |   |
| Address<br>1305 Philtower Building Tulsa, Oklahoma 74103   |   |
| Reason(s) for filing (Check proper box)  | Other (Please explain)  |
| <input type="checkbox"/> New Well<br><input type="checkbox"/> Recompletion<br><input type="checkbox"/> Change in Ownership | Change of Operator<br>Change in Transporter of:<br><input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas<br><input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate |

If change of ownership give name and address of previous owner MESA GRANDE, RESOURCES

II. DESCRIPTION OF WELL AND LEASE

|  |               |  |  |                        |
|--|---------------|--|--|------------------------|
| Lease Name<br>Rucker Lake  | Well No.<br>3 | Pool Name, including Formation<br>Gavilan Mancos | Kind of Lease<br>State, Federal or Fee Federal | Lease No.<br>SF-079333 |
| Location<br>Unit Letter L : 940 Feet From The West Line and 1760 Feet From The South |               |  |  |                        |
| Line of Section 25 Township 25N Range 2W, NMPM, Rio Arriba County                    |               |  |  |                        |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|   |   |            |
|---|---|------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/><br>Giant Refining Company              | Address (Give address to which approved copy of this form is to be sent)<br>P.O. Box 256 Farmington NM 87499  |            |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/><br>El Paso Natural Gas Company | Address (Give address to which approved copy of this form is to be sent)<br>P.O. Box 990 Farmington, NM 87499 |            |
| If well produces oil or liquids, give location of tanks.  | Unit<br>L   | Sec.<br>25 |
|   | Twp.<br>25N   | Rge.<br>2W |
|   | Is gas actually connected? yes  |            |
|   | When<br>8/14/83   |            |

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

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

Christopher L. Phillips  
Christopher L. Phillips (Signature)  
Vice President  
(Title)  
5/26/88  
(Date)

OIL CONSERVATION DIVISION

JUN 08 1988

APPROVED \_\_\_\_\_, 19

BY 3. J. [Signature]

TITLE SUPERVISION DISTRICT #3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of conditions.  
Separate Forms C-104 must be filed for each pool in multiple completed wells.

#### IV. COMPLETION DATA

|   |                             |          |                 |          |          |                   |           |             |              |
|---|-----------------------------|----------|-----------------|----------|----------|-------------------|-----------|-------------|--------------|
| Designate Type of Completion - (X)          |                             | Oil Well | Gas Well        | New Well | Workover | Deepen            | Plug Back | Same Res'v. | Dill. Res'v. |
| Date Spudded                                | Date Compl. Ready to Prod.  |          | Total Depth     |          |          | P.B.T.D.          |           |             |              |
| Elevations (DF, RKB, RT, GR, etc.)          | Name of Producing Formation |          | Top Oil/Gas Pay |          |          | Tubing Depth      |           |             |              |
| Perforations                                |                             |          |                 |          |          | Depth Casing Shoe |           |             |              |
| <b>TUBING, CASING, AND CEMENTING RECORD</b> |                             |          |                 |          |          |                   |           |             |              |
| HOLE SIZE                                   | CASING & TUBING SIZE        |          | DEPTH SET       |          |          | SACKS CEMENT      |           |             |              |
|   |                             |          |                 |          |          |                   |           |             |              |
|   |                             |          |                 |          |          |                   |           |             |              |
|   |                             |          |                 |          |          |                   |           |             |              |
|   |                             |          |                 |          |          |                   |           |             |              |

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed 100 allowable for this depth or be for full 24 hours)

|                                 |                 |   |            |
|---------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tanks | Date of Test    | Producing Method (Flow, pump, gas lift, etc.) |            |
| Length of Test                  | Tubing Pressure | Casing Pressure                               | Choke Size |
| Actual Prod. During Test        | Oil - Bbls.     | Water - Bbls.                                 | Gas - MCF  |

#### GAS WELL

|                                  |                           |                           |                       |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D        | Length of Test            | Bbls. Condensate/MMCF     | Gravity of Condensate |
| Testing Method (plots, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size            |