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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, Anesia, NM 88210

## OIL CONSERVATION DIVISION P.O. Box 2088

Cyclinic   Mol   Company   State   Production   And Natural   And Natu	DISTRICT III	Santa Fe, New Mexico 87504-2088							
Special   Spec	1000 Rio Brazos Rd., Aztec, NM 87410	REQUEST F	OR ALLOWA	BLE AND A	AUTHORIZ	ZATION			
Mail Ton Gil   Company   Surface   Ton   Denver   Co   80202		TOTR	ANSPORT OIL	AND NA	TURAL GA				
Change in Transporter of   Change in Transporter   Change in Transporter of   Change in Transporter of   Change in Transporter of   Change in Transporter   Change in Transport	Mallon Oil Comapny				\(\frac{\text{W300362355400D1}}{300392355400D2}\)				
Change in Transporter of   Change in Transporter   Change in Transporter of   Change in Transporter of   Change in Transporter of   Change in Transporter   Change in Transport	999 18th Street, Suite	e 1700, Denv	er. CO 8020	)2					
Recompletion   Catesphend Gas   Do Gas	Reason(s) for Filing (Check proper box)		,		er (l'lease expla	in)			
Congress Operators   Castesphead Gas   Examinates   Castesphead Gas   Castesphea		r.··							
II. DESCRIPTION OF WELL AND LEASE  Least Name  Ribeyowids Federal 2  Least Name  Unit letter P	l : Ξ								
I. DESCRIPTION OF WELL AND LEASE   Lease No.   Ribeyovide   Federal 2   18.   Seed Name   Ribeyovide   Federal 2   18.   Seed Name   Ribeyovide   Rederal 2   18.   Seed Name   Ribeyovide   Ri	If change of operator give name and address of previous operator								
Lase Name Ribe you'd ids Federal 2  Usail Fenet Part   Pederal 2	•	AND LEASE							
Lecation  Unit Lener P : 860 Feet From The SOIRLD Line and 990 Feet From The East Line Section 2 Township 25N Range 2W NMFM, Rio Arriba County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Auditoried Tamporete of Calinghead Gas X or Dry Ost Address (Gine address to which approved copy of this form is to be sent)  Nome of Auditoried Tamporete of Calinghead Gas X or Dry Ost Address (Gine address to which approved copy of this form is to be sent)  P. O. Box 236, Farmington, NM 87499  Nome of Auditoried Tamporete of Calinghead Gas X or Dry Ost Address (Gine address to which approved copy of this form is to be sent)  P. O. Box 236, Farmington, NM 87499  Nat I on Oil Company  Ween 7  P. O. Box 246, Farmington, NM 87499  Nation Oil Company  Ween 7  P. O. Box 256, Farmington, NM 87499  Nation Oil Company  Note of Auditoried Tamporete of Calinghead Gas X or Dry Ost Address (Gine address to which approved copy of this form is to be sent)  P. O. Box 256, Farmington, NM 87499  Nation Oil Company  Note of Auditoried Tamporete of Calinghead Gas X or Dry Ost Dry Ost Device to Address (Gine address to which approved copy of this form is to be sent)  P. O. Box 256, Farmington, NM 87499  NM 87499  NM 87499  P. O. Box 256, Farmington, NM 87499  P. O	Lease Name Well No. Pool Name, Include			ing Fôrmation Kind c			Lease	Lease No.	
Section 2 Township 25N Range 2W NNFN, Rio Arriba County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Authorised Interprete of Oil Or Condensate Catanghest of Oil Or Condensate Address (Give address to which approved copy of this form is to he sent)  From of Authorised Interprete of Catanghest Gas To Condensate Parker of Authorised Interprete of Catanghest Gas To Oil Gas To Oil Oil Company  P. O. Box 256, Fartinington, NR 87499  P.		Canton Gree			Bhorn Graneros Dekota State				
HI. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Company  Search Mallon Company  Address (Give address to which approved copy of this form is to be sent)  P. O. Box 256, Farmington, NM 87499  P. D. Box 256, Farmington, NM 87499  P	Unit Letter P	:860	_ Feet From The _S	South Line	e and <u>990</u>	Fe	et From The	East Line	
Address (Circ address to which approved copy of this form as to be seril)    Second Refining Company   P.O. Box 256, Farmington, NM 37499									
P.O. Box 256, Farmington, NN 87499	III. DESIGNATION OF TRAN	SPORTER OF C	OIL AND NATU						
Name of Authorized Transporter of Casinghead Gas   X   or Day Gas   Mail 100 101 Company	Ciant Po fining Co.								
Sec.   Twp.   Reservation of traits.   Suite   1700, Denver, CO   80202	Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [1]			Address (Giv	K 256, Fa	rmingto	n, NM 87499		
Unit Sec. Twp. Rgc. It gas actually connected?  Fig. 2 25N 2W Yes 1/86  If this production is commingled with that from any other lease or pool, give comminging order number:  V. COMPLETION DATA  Designate Type of Completion - (X)  Date Spishted  Date Compl. Ready to Pool.  Date Compl. Ready to Pool.  Date Spishted  Date Compl. Ready to Pool.  Date Compl. Ready to Pool.  Tubing Depth  Date Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING 8. TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL WELL  (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this days of the state of the	Mallon Oil Company				St., Su	ite 170	0, Denvei	Denver. CO 80202	
If this production is commingled with that from any other lease or pool, give comminging order number:  IV. COMPLETION DATA  Designate Type of Completion - (X)  Date Sprakter  Date Sprakter  Date Sprakter  Date Compl. Ready to Prod.  Date Compl. Ready to Prod.  Date Sprakter  Date Sprakter  Date Sprakter  Date Sprakter  Date Sprakter  Date Compl. Ready to Prod.  Total Depth  Total Depth  P.B.T.D.  Total Depth  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING a TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL WELL  Get must be after recovery of total volume of load oil and must be equal to an exceed top allowable for the fundable fundable for the fundable fu	If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   Rge.   Is gas actually connected?   W					nen ?		
Designate Type of Completion - (X)  Dist Spinkled  Date Compl. Ready to Prod.  Dist Spinkled  Date Spinkled  Date Compl. Ready to Prod.  Dist Spinkled  Date Spinkled  Date Compl. Ready to Prod.  Total Depth  Dist District Depth  District Depth  District Depth  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL WELL  Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for the damper of the producing Method (Plow, pump, gas 1879)  Date First New Chi Run To Tank  Date of Test  Length of Test  Tubing Pressure  Casing Pressure (Shut-in)  GAS WELL  Actual Prod. Test  Tubing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I bereby certify that the rules and regulations of the Oil Conservation Division have been complicate with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  There is a Meandrews Production Assistant  New Well Workover Deepen Plug Back Same Resv Diff Reev  Depth Casing Pressure Depth D	If this production is commingled with that i	<u>-</u> 1 ~					1/86	7111	
Date Speaded Date Completion - (X)  Date Speaded Date Compl. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc.)  Name of Producing Formation  Top Oil/Oss Fsy  Tubing Depth  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE CASING & TUBING SIZE  TUBING SIZE  CASING & TUBING SIZE  TUBING SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth of the standard of th	IV. COMPLETION DATA		town Bree community	mg order name					
Elevations (DF, RRB, RT, GR, etc.) Name of Producing Formation  Top Oil/Gas Fay  Tubing Depth Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL  (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for bin depth company, gas to producing Method (Flow, pump,		Oil We	ll Gas Well	New Well	Workover	Deepen	Plug Back   S	ame Res'v Diff Res'v	
TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL  (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth cords feeting 2.2 minutes and the state of	Date Spudded	Date Compl. Ready	to Prod.	Total Depth	I		P.B.T.D.		
TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL  Gress must be after recovery of total volume of load oil and must be equal to or exceed top allowable for phis desproach feetings of the first New Oil Run To Tank  Date of Test  Length of Test  Tubing Pressure  Casing Pressure  Thoke Size  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.  TUBING, CASING AND CEMENTING RECORD  TOBING SIZE  OIL GONSERVATION DIVISION  JUN 7 1993  Date Approved  By  SUPERVISOR DISTRICT  SUPERVISOR DISTRICT  SUPERVISOR DISTRICT  SUPERVISOR DISTRICT  SUPERVISOR DISTRICT  SOME SIZE  SUPERVISOR DISTRICT  SUPERVISOR DISTRICT  SOME SIZE  SUPERVISOR DISTRICT  SUPERVISOR DISTRICT	Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL  (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this demonstration of the first New Oil Run To Tank  Date of Test  Length of Test  Length of Test  Tubing Pressure  Casing Pressure  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been completed with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  Theress A. Meandrews Production Assistant  DEPTH SET  SACKS CEMENT	Perforations						Depth Casing Shoe		
HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL  (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this demonstration of the first New Oil Run To Tank  Date of Test  Length of Test  Length of Test  Tubing Pressure  Casing Pressure  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been completed with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  Theress A. Meandrews Production Assistant  DEPTH SET  SACKS CEMENT		HTV LTS 11.00		- 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1					
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL  (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this department of perfuls 2 to the first New Oil Run To Tank  Date of Test  Length of Test  Tubing Pressure  Actual Prod. During Test  Oil - Bbls.  Water - Bbls.  GAS WELL  Actual Frod. Test - MCF/D  Length of Test  Distr. 3  Bbls. Condensate/MMCF  Uravity of Condensate  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.  Distr. 3  OIL CONSERVATION DIVISION  Date Approved  By  SUPERVISOR DISTRICT AS	HOLE SIZE								
OIL WELL    Date   First   New Oil Run To Tank   Date of Test   Date of Test   Producing Method (Flow, pump, gas III)   To Tank   Date of Test   Producing Method (Flow, pump, gas III)   To Tank   Date of Test   Producing Method (Flow, pump, gas III)   To Tank   Date of Test   Producing Method (Flow, pump, gas III)   To Tank   Date of Test   District   Tubing Pressure   Casing Pressure		OASING U	DEPTH SET			SACKS CEMENT			
OIL WELL    Date   First   New Oil Run To Tank   Date of Test   Date of Test   Producing Method (Flow, pump, gas III)   To Tank   Date of Test   Producing Method (Flow, pump, gas III)   To Tank   Date of Test   Producing Method (Flow, pump, gas III)   To Tank   Date of Test   Producing Method (Flow, pump, gas III)   To Tank   Date of Test   District   Tubing Pressure   Casing Pressure									
OIL WELL    Date   First   New Oil Run To Tank   Date of Test   Date of Test   Producing Method (Flow, pump, gas III)   To Tank   Date of Test   Producing Method (Flow, pump, gas III)   To Tank   Date of Test   Producing Method (Flow, pump, gas III)   To Tank   Date of Test   Producing Method (Flow, pump, gas III)   To Tank   Date of Test   District   Tubing Pressure   Casing Pressure					7 / of				
Date First New Oil Run To Tank  Date of Test  Length of Test  Length of Test  Date of Test  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Distr. 9  Actual Prod. During Test  Oil - Bbls.  Water - Bbls.  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Distr. 9  Bbls. Condensate/MMCF  Gravity of Condensate  Union Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  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.  Date Approved  By  SUPERVISOR DISTRICT Tea	V. TEST DATA AND REQUES	T FOR ALLOW	ABLE						
Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Choke Size  Thomating Neutron (Prow., promp., gas 14.34)  Thomating Neutron (Prow., promp., gas 14.34)  Casing Pressure  Casing Pressure  Choke Size  Choke Size  Choke Size  Oil - Bbls.  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  Thereby 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.  Date Approved  Signature  Theresa A. Meandrews Production Assistant  SUPERVISOR DISTRICT As a SUPERVISOR DISTRICT As a SUPERVISOR DISTRICT As a SUPERVISOR DISTRICT As a Supersymptom of the Oil Conservation and the conservation of the Oil Conservati	,	Covery of total volum	e of load oil and must	be equal to or	exceed top allo	wable for this	depet or for	July 2 April 19	
Actual Prod. During Test  Oil - Bbls.  Water - Bbls.  Water - Bbls.  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Tubing 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.  OIL CONSERVATION DIVISION  Date Approved  Signature  Theresa A. Meandrews Production Assistant  SUPERVISOR DISTRICT To	- Tank	Date of Text		Producing Method (Flow, pump, gas lift e			y E U E		
GAS WELL  Actual Prod. Test - MCF/D  Length of Test  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.  Signature  Theresa A. Mcandrews Production Assistant  Matt Polis.  Bbls. Condensate/MMCF  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  OIL CONSERVATION DIVISION  JUN 7 1993  Date Approved  By  SUPERVISOR DISTRICT To	Length of Test	Tubing Pressure		Casing Pressure			Thoke Size 7 1993		
Length of Test   Bbls. Condensate/MMCF   Gravity of Condensate	Actual Prod. During Test	Oil - Bbls.		Water - Bbis.			Gas MCEO	N. DIV.	
Casing Pressure (Shut-in)   Casing Pressure (Shut-in)   Casing Pressure (Shut-in)   Choke Size	GAS WELL	L		l			Dis	T. 9	
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.  OIL CONSERVATION DIVISION  JUN 7 1993  Date Approved  Signature  Theresa A. Mcandrews Production Assistant  SUPERVISOR DISTRICT As		Length of Test		Bbls. Condensate/MMCF			Gravity of Condensate		
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.  Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By  SUPERVISOR DISTRICT AS	lesting Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)			Choke Size		
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.  Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By  SUPERVISOR DISTRICT AS	VI ODED ATOD CEDERAC	ATE OF CO.	***	\ <sub>[</sub>			<u></u>		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By  Supersylve District As	Thereby certify that the rules and requi-	ATE OF COM	PLIANCE		OII CON	ISERV	ATION D	IVISION	
Date Approved  Signature  Theresa A. Mcandrews Production Assistant  Date Approved  By	Division have been complied with and that the information given above				<b></b> .				
Signature Theresa Λ. Mcandrews Production Assistant  By SUPERVISOR DISTRICT TO	In the complete to the best of my knowledge and belief.								
Theresa A. Mcandrews Production Assistant SUPERVISOR DISTRICT AS	Nionaliure				3.00				
	Theresa A. Mcandrews Production Assistant Printed Name				SUPERVISOR DISTRICT #3				

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

(303) 293-2333

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title\_

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Title

Telephone No.

3) Fill out only Sections I II III and Tire

5/18/93