## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

PR. 07 (07:44 544117ED				
DISTRIBUTION				l
SANTA FE		Ι		
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U.S.O.S.		]		l
LAND OFFICE				l
TRANSPORTER	OIL	]		l
	GAS			ĺ
OPERATOR		1		l
PAGRATION OFFICE			L	

## 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

AN				
AUTHORIZATION TO TRANSP	ORT OIL AND NATURAL GAS			
I.	AUC 1 4 1985			
Operator				
Silverridge Corporation				
8101 NW 10th, Okla. City, OK 73127  Rection(s) for filing (Check proper box)	Other (Please explain)			
New Well Change in Transporter of:				
	Change of Operator to be effective			
	ndensote May 16, 1985			
Edwards & Leach Oil Comp	pany			
If change of ownership give name 501 NW Eventy Suite 600 Okla City OK 73118				
and address of previous owner JOI NW EXPWY, Built 0003				
II. DESCRIPTION OF WELL AND LEASE				
Lease Name   Well No. Pool Name, Including Fo				
Jicarilla 119 1 Tapacito Pictur	ed Cliffs State, Federal or Fee Federal			
Location				
Unit Letter 0 : 790 Feet From The South Line and 1850 Feet From The East				
Unit Letter ; 750 Feet From the Bodett _ Line and Feet From the				
Line of Section 5 Township 26N Range 4	W NMPM, Rio Arriba County			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Name of Authorized Transporter of Oil				
Name of Authorized Transporter of Casinghead Gas or Dry Gas 💟	Address (Give address to which approved copy of this form is to be sent)			
Northwest Pipeline Corp.	P.O. Box 8900, Salt Lake City, Utah 84108			
If well produces oil or liquids, Unit Sec. Twp. Rqs.	Is gas actually connected? When			
give location of tanks.	Yes 1-1-74			
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	OIL CONSERVATION DIVISION			
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED AUG 1 14985			
been complied with and that the information given is true and complete to the best of	5-1701			
my knowledge and belief.	BY			
	SUPERVISOR DISTRICT # 3			
	TITLE			
$\rho_{i\rightarrow i}$ $\rho_{i\rightarrow i}$	This form is to be filed in compliance with RULE 1104.			
(Signature)	If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.  All sections of this form must be filled out completely for allowable on new and recomplated wells.  Fitt out only Sections I. II. III. and VI for changes of owner.			
Production Clerk (Title)				
August 12, 1985				
(Date)	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.			