Submit 5 Copies Appropriate District Office P.O. Box 1980, Hobbe, 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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

| REQUEST FOR ALLOWABLE AND AUTHORITOTICS TO TRANSPORT OIL AND NATURAL G | AS |
|--|---|
| • | Well Artino |
| Operator Snyder Oil Corporation | 1076200 |
| Address California St. Ste 3500, Denver, CO 80202 | Jaio) |
| Research for Filing (Check proper box) | ALLONY |
| New Well Change in Transporter of: | |
| Recompletion Oil Dry Gat | |
| Change in Operator Columbus Energy Corp. P.O. Box 2 | 038, Farmington, NM 8/499 |
| If change of operator give name and address of previous operator | |
| II. DESCRIPTION OF WELL AND LEASE | Kind of Lease Lease No. |
| Lease Name | Federal 82-078707 |
| DUKE * Basin bakota | |
| Location H 1850 Feet From The North Line and 11 | 80 Feet From The East Line |
| Unit Letter H 1850 Feet From The North Line and | Feet From the |
| 1214 | SAN JUAN County |
| Section 13 Township 31N Range 13W , NMPM, | |
| AND NATURAL GAS | |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Authorized Give address to | which approved copy of this form is to be sent) |
| Name of Authorized Transporter of Oil | 56. Farmington, NM 87499 |
| GTATTO THE THE ACTION OF DAY GOE W Address (Give address to | which approved copy of this form is to be sene, |
| Name of Authorized Transporter of Catalignation | 399, Bloomfield, NM 87413 |
| Suffice 1 a day de office 1 and 1 an | ? When ? |
| If well produces ou or inquies, | |
| give location of tanks. H 13 31N 13W Yes If this production is commingled with that from any other lease or pool, give comminging order number: | |
| If this production is commingled with that from any other lease of poor, pro | |
| VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CO | DNSERVATION DIVISION |
| the many parties that the rules and regulations of the Oil Conservation | NOV 2 6 1990 |
| Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Date Appro | |
| \bigcirc A . NI na | Burs Chang |
| Signature Patricia Tognoni Engr Tech By | SUPERVISOR DISTRICT #3 |
| Printed Name Title | |
| 10/01/90 303-292-9100 | |
| Date Telephone No. | |

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

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.



