Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

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

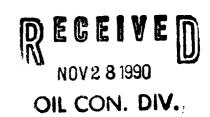
P.O. Drawer DD, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

| Operator Snyder Oil Corporation  | Weil API No.<br>1076600  |
|--|--|
| Address 1801 California St. Ste 3500, Denver, CO 80202   |  |
| Reason(s) for Filing (Check proper box)  New Well Change in Transporter of:  Recompletion Oil Dry Gas  Change in Operator Casinghead Gas Condensate  |  |
| If change of operator give mams Columbus Energy Corp. P.O. Box 2038, Farmington, NM 87499 and address of previous operator   |  |
| II. DESCRIPTION OF WELL AND LEASE  Lease Name  JACKSON 2  Well No. Pool Name, Including Basin Dale   | <u> </u>   |
| Unit Letter G: 1750 Feet From The North Line and 1750 Feet From The East Line  |  |
| Section 18 Township 31N Range 12W , NMPM, SAN JUAN County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)  Giant Refinery P.O. Box 256, Farmington, NM 87499 |  |
| Name of Authorized Transporter of Cazinghead Gas or Dry Gas Sunterra Gas Gathering Co  | Address (Give address to which approved copy of this form is to be sent)  P.O. Box 1899, Bloomfield, NM 87413.  Is gas actually connected? When? |
| give location of tracks.  G 18 31N 12W  If this production is commingled with that from any other lease or pool, give commingli  |  |
| 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 BINGON  |
| Signature Patricia Tognoni Engr Tech   | By SUPERVISOR DISTRICT 18  |
| Printed Name         Title           . 10/01/90         303-292-9100           Date         Telephose No.  | Title  |

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.



DIST 3