Submit 5 Copies
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 Instruct at Rottom of F

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

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

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

	PORT OIL AND NATU			
L. TO TRANS	TONI OIL AND NATE	Well API No.		
Snyder Oil Corporation		2302300	2302300	
Address				
1801 California St. Ste 3500,	Denver, CO 802	202		
Reason(s) for Filing (Check proper box)	Other (Please explain)		
New Well Change in Trans	· —			
Recompletion Oil Dry				
Change is Operator Casingheed Gas Cos	icasate 📋	ox 2038, Farmingto	on. NM 87499	
If change of operator give name and address of previous operator	, corp. 7.0. t			
IL DESCRIPTION OF WELL AND LEASE				
Leas Name Well No. Pool Name, Including Formation		Kind of Lease	Lease No.	
	lanco Mesaverde	e Federal	29-059848	
Location				
Unit Letter C : 790 Feet	Prom The North Line as	1980 Feet From The	West Line	
Section 11 Township 31N Rang	13W NMP	M, SAN JUAN	County	
	NO NATIONAL CAC			
III. DESIGNATION OF TRANSPORTER OF OIL A Name of Authorized Transporter of Oil	Address (Give as	ddress to which approved copy of this for	m is to be sent)	
Giant Refinery		ox 256, Farmington.		
		deress to which approved copy of this for		
El Paso Natural Gas Company		ox 4990. Farmington		
If well produces oil or Hypida, Unit Sec. Twp			LA COMMENTENCE OF THE STATE OF	
the transfer of sector	IN 13W Yes	<u> </u>		
If this production is commissied with that from any other lease or pool,	give commingling order number:			
VI. OPERATOR CERTIFICATE OF COMPLIA	NCE	L CONCEDIATION D	W. (ICION)	
I hereby certify that the rules and regulations of the Oil Conservation		OIL CONSERVATION DIVISION		
Division have been complied with and that the information given about true and complete to the best of my knowledge and belief.	!!	NOV 9	77 1000	
	Date A	pproved <u>NUV Z</u>	NOV 2 7 1990	
Criticia deprine de	100%		Λ	
	Bv	3-1		
Signature Patricia Tognoni Engr Te	ecn /		••	
Pristed Name Title 10/01/90 303-292	Title_	SUPERVISOR	DISTRICT #3	
Date Telephone	II			
l creptions	.~.			

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.

