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Appropriate District Office
DISTRICT I 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, Artesia, NM 88210

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

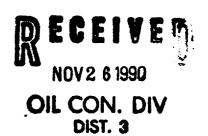
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

TO TRANSPORT OIL AND NATURAL GAS	
Operator Snyder Oil Corporation	Well API No. 2361600
Address 1801 California St. Ste 3500, Denver, CO 80202	
Reason(s) for Filing (Check proper box)  Other (Please explain)	
New Well Change in Transporter of:	
Recompletion Oil Upy Gas U	
Change in Operator	B O Boy 2038 Farmington, NM 8/499
If change of operator give name Columbus Energy Corp. P.O. Box 2038, Farmington, NM 8/499 and address of previous operator	
II. DESCRIPTION OF WELL AND LEASE	
Lease Name Well No. Pool Name, Including	g Formation Kind of Lease Lease No.
ARNSTEIN 15 /E Basin Dal	kota Federal 82-078243
I and a	
C 1065 North Line 1/91 Feet From The West Line	
<del></del>	
Section 18 Township 31N Range 12'	W NIMPM, SAN JUAN COUNTY
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)  P.O. Box 256, Farmington, NM 87499  P.O. Box 256, Farmington, NM 87499	
Name of Authorized Transporter of Casinghead Gas or Dry Gas X	Address (Give address to which approved copy of this form is to be sent)
Sunterra Gas Gathering Co.	P.O. Box 1899, Bloomfield, NM 87413
If well produces oil or liquids, Unit Sec. Twp. Rgs.	The state of the s
give location of tanks.	Yes 1 6/30/80
If this production is commingled with that from any other lease or pool, give commingling order number:	
VI. OPERATOR CERTIFICATE OF COMPLIANCE  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 above is true and complete to the best of my knowledge and belief.	Date Approved NOV 2 6 1990
Signature Date of Transport Food Tech	By Jan Shan
Printed Name  .10/01/90  Signature Patricia Tognoni / Engr Tech Title .303-292-9100	Title SUPERVISOR DISTRICT #3
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.



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