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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

OIL CONSERVATION DIVISION

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

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. 2434900
Address 1801 California St. Ste 3500, Denver, CO 80202		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator Columbus Energy Corp. P.O. Box 2038, Farmington, NM 87499		

II. DESCRIPTION OF WELL AND LEASE

Lease Name PAYNE 1E *	Well No. 1E	Pool Name, including Formation Flora Vista Gallup	Kind of Lease Federal	Lease No. 82-078464
Location Unit Letter <u>P</u> : <u>1120</u> Feet From The <u>South</u> Line and <u>1120</u> Feet From The <u>East</u> Line Section <u>35</u> Township <u>31N</u> Range <u>13W</u> , <u>NMPM</u> , <u>SAN JUAN</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Giant Refinery	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> 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					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 35	Twp. 31N	Rgn. 13W	Is gas actually connected? Yes	When? 9/82 R7056

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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

*Patricia Tognoni*

Signature Patricia Tognoni Engr Tech

Printed Name 10/01/90 Title 303-292-9100

Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved NOV 27 1990

By *[Signature]*

Title SUPERVISOR DISTRICT #3

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.

RECEIVED  
NOV 27 1990  
OIL CON. DIV.  
DIST. 3

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TO TRANSPORT OIL AND NATURAL GAS

Operator <b>Snyder Oil Corporation</b>		Well API No. <b>2434900</b>
Address <b>1801 California St. Ste 3500, Denver, CO 80202</b>		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator <b>Columbus Energy Corp. P.O. Box 2038, Farmington, NM 87499</b>		

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>PAYNE +E *</b>	Well No. <b>12</b>	Pool Name, including Formation <b>Basin Dakota</b>	Kind of Lease <b>Federal</b>	Lease No. <b>82-078464</b>
Location				
Unit Letter <b>P</b>	<b>1120</b>	Feet From The <b>South</b> Line and <b>1120</b>	Feet From The <b>East</b> Line	
Section <b>35</b>	Township <b>31N</b>	Range <b>13W</b>	<b>NMPM</b>	<b>SAN JUAN</b> County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<b>Giant Refinery</b>	<b>P.O. Box 256, Farmington, NM 87499</b>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<b>Sunterra Gas Gathering Co.</b>	<b>P.O. Box 1899, Bloomfield, NM 87413</b>	
If well produces oil or liquids, give location of tanks.	Unit <b>P</b>	Sec. <b>35</b>
	Twp. <b>31N</b>	Rgn. <b>13W</b>
	Is gas actually connected? <b>Yes</b>	

If this production is commingled with that from any other lease or pool, give commingling order number:

**9/82 R7056**

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.

Signature *Patricia Tognoni*  
Printed Name **Patricia Tognoni** Title **Engr Tech**  
Date **10/01/90** Telephone No. **303-292-9100**

OIL CONSERVATION DIVISION

Date Approved **NOV 27 1990**  
By *[Signature]*  
Title **SUPERVISOR DISTRICT #3**

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