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SANTA FE FILE

U.B.G.S. LAND OFFICE TRANSPORTER GAS

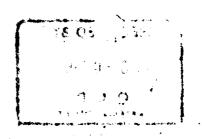
STATE OF NEW MEXICO O. C. D. ENERGY AND MINERALS DEPARTMENTARTESIA, OFFICE

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE AND

| OPERATOR | AA | ıD | • | |
|---|---|---|--|----------------|
| PROBATION OFFICE | AUTHORIZATION TO TRANSP | | RAL GAS | • |
| I. | ACTIONIZATION TO TRANS | J J.L /4/D 11/10 | | |
| Operator | | | | |
| Cibola Energy Cor | noration | | | ļ |
| Address | P014120 | · · · · · · · · · · · · · · · · · · · | | |
| | Thugueraue New Me | xico 87103 | | |
| | Albuquerque, New Me | Other (Please | | |
| Reason(s) for filing (Check proper box) | | Other (Fredri | explain | |
| Mem Mell | Change in Transporter of: | _ | | |
| Recompletion | | y Gas | | |
| X Change in Ownership | Casinghead Gas Co | ndensate | | |
| ing aggress of previous owner. | | 7990 IH 10 | W., San Antonio, TX | 78230 |
| II. DESCRIPTION OF WELL AND L | Well No. Pool Name, Including Fo | rmation | Kind of Lease | Lease No. |
| Lease Name | | | State, Federal or Fee Fee | |
| Plains SL 19 | 1 Wildcat Penn | <u> </u> | side, reduction to Fee | |
| Unit Letter B : 380 | Feet From The North Line | and 2200 | Feet From TheEast | |
| Line of Section 19 Townshi | ip 10S Range | 28E , NMPM | , Chaves | County |
| III. DESIGNATION OF TRANSPOR | or Condensate | Address (Give address | to which approved copy of this form is to | |
| Navajo Crude Oil Pur | rchasing | P. O. Box 15 | 9, Artesia, NM 8821 to which approved copy of this form is to | 0 |
| Name of Authorized Transporter of Casingh | nead Gas 🔀 💮 or Dry Gas 🗀 | ł | | ľ |
| Pecos River Gas Plan | nt | P.O. Box 400 | O, The Woodlands, TX | 77380 |
| If well produces oil or liquids, Un | | is gas actually connect | ed? When | |
| If this production is commingled with the | nat from any other lease or pool, | give commingling orde | r number: | |
| NOTE: Complete Parts IV and V on | n reverse side if necessary. | | | |
| VI. CERTIFICATE OF COMPLIANCE | E | OIL C | ONSERVATION DIVISION | |
| I hereby certify that the rules and regulations of been complied with and that the information given my knowledge and belief. | of the Oil Conservation Division have even is true and complete to the best of | APPROVED | • | 19 |
| Karen Tve | de | If this is a req | be filed in compliance with RULE uest for allowable for a newly drille t be accompanied by a tabulation of | d or deepened |
| / (Signature) Geologist | <u> </u> | tests taken on the | well in accordance with RULE 111 this form must be filled out comple | • |
| (Tille) 8/4/86 | | able on new and re | completed wells. | |
| 8/4/86 (Date) | | Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition. | | |
| | | Separate Form completed wells. | s C-104 must be filed for each po | ol in multiply |



Form C-104 Revised 10-01-78 Format 06-01-83 Pago 2

| Designate Type of Completic | on - (X) Gas Well Gas Well | New Well Workover | Deepen | Plug Back | Same Res'v. Diff. Res' |
|------------------------------------|-----------------------------|-------------------|-------------|-------------|------------------------|
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | <u>-i</u> | P.B.T.D. | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | | Tubing Dep | th |
| Perforations | <u> </u> | | | Depth Casin | ng Shoe |

AUG -6 1986

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT O. C. D.

| | C V E O | Π | |
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| DISTRIBUTI | OM . | | T - |
| SANTA FE | | \vdash | |
| FILE | | | |
| U.B.G.4. | | | |
| LAND OFFICE | | 1 | |
| TRANSPORTER | OIL | 1 | |
| | GAS | | |
| OPERATOR | | | |
| PRORATION OFFICE | | | |

ARTESIA, OFFICE OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104

Page 1

Separate Forms C-104 must be filed for each pool in multiply completed wells.

Revised 10-01-78 Format 06-01-83

| TRANSPORTER GAS DECVIECT EN | ND 41 1 0 11 1 1 1 1 | | | |
|---|---|---|----------------------------|--|
| OPERATOR | OR ALLOWABLE | • | | |
| T PROBATION OFFICE | AND | D.1. 0.0 | | |
| I. AUTHORIZATION TO TRANS | PURTUIL AND NATU | RAL GAS | | |
| Operator | | | | |
| Cibola Energy Corporation | | | | |
| Address | | | | |
| P. O. Box 1668, Albuquerque, New M | exico 87103 | | | |
| Reason(s) for filing (Check proper box) | | | | |
| New Well Change in Transporter of: | Other (Please | explain) | | |
| | 6 | | | |
| | ry Gas | | | |
| X Change in Ownership Casinghead Gas C | ondensate | | | |
| If change of ownership give name Tenneco Oil Company and address of previous owner . | , 7990 IH 10 | W., San Antonio, TX | 78230 | |
| II. DESCRIPTION OF WELL AND LEASE | | | | |
| Lease Name Well No. Pool Name, Including F | ormation | Kind of Lease | Lease No. | |
| Plains SL 19 1 Wildcat Pen | n | State, Federal or Fee Fee | | |
| Location | | | ' | |
| Unit Letter B : 380 Feet From The North Lin | ne and 2200 | Feet From The East | | |
| Line of Section 19 Township 10S Range | 28Е , ммрм, | Chaves | County | |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL | CAS | | | |
| Name of Authorized Transporter of Oil X or Condensate | | o which approved copy of this form is to | he senti | |
| | 1 | •• | • | |
| Navajo Crude Oil Purchasing Name of Authorized Transporter of Casinghead Gas or Dry Gas | Address (Cine address | 9, Artesia, NM 8821 o which approved copy of this form is to | 0 | |
| ** | ł. | | | |
| Pecos River Gas Plant Unit Sec. Twp. Rge. | Is gas actually connecte | O, The Woodlands, TX | 77380 | |
| If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. B 19 10S 28E | no | d? When | | |
| If this production is commingled with that from any other lease or pool, | give commingling order | number: | | |
| NOTE: Complete Parts IV and V on reverse side if necessary. | | | | |
| VI. CERTIFICATE OF COMPLIANCE | OIL CO | DNSERVATION DIVISION | | |
| hereby certify that the rules and regulations of the Oil Conservation Division have | APPROVED | | 19 | |
| been complied with and that the information given is true and complete to the best of | | | - | |
| my knowledge and belief. | BY | | | |
| | TITLE | | | |
| \mathcal{L}_{α} \mathcal{L}_{α} | This form is to | be filed in compliance with RULE | 1104. | |
| RUSEN IVEAL | If this is a request for allowable for a newly drilled or despend | | | |
| / (Signature) Geologist . | well, this form must | be accompanied by a tabulation of ell in accordance with RULE 111. | the deviation | |
| (Tule) 8/4/86 | able on new and rec | | | |
| (Date) | Fill out only Se well name or number, | or transporter, or other such change | es of owner, of condition. | |