

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

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OPERATOR	<input checked="" type="checkbox"/>
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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

RECEIVED BY  
MAR 14 1986  
O. C. D. REQUEST FOR ALLOWABLE  
AND  
ARTESIA OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
Cibola Energy Corporation ✓

Address  
P. O. Box 1668, Albuquerque, New Mexico 87103

Reason(s) for filing (Check proper box)  
☒ New Well  
☐ Recompletion  
☐ Change in Ownership

Change in Transporter of:  
☒ Oil  
☐ Casinghead Gas  
☐ Dry Gas  
☐ Condensate

Other (Please explain)  
CASINGHEAD GAS MUST NOT BE  
FLARED AFTER 5-19-86  
UNLESS AN EXCEPTION TO  
RULE 306 IS OBTAINED ✓

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mabel	Well No. 4	Pool Name, including Formation Race Track San Andres	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter H : 1650 Feet From The North Line and 990 Feet From The East Line of Section 30 Township 10S Range 28E , NMPM, Chaves County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Crude Oil Purchasing	Address (Give address to which approved copy of this form is to be sent) P. O. Box 159, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Pecos River Gas Plant, Ltd.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4000, The Woodlands, TX 77380
If well produces oil or liquids, give location of tanks. Unit A Sec. 30 Twp. 10S Rge. 28E	Is gas actually connected? no When Post FD-2

If this production is commingled with that from any other lease or pool, give commingling order number: 3-21-86

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Karon Azar  
(Signature)  
Drilling Secretary  
(Title)  
3/12/86  
(Date)

OIL CONSERVATION DIVISION  
APPROVED MAR 19 1986  
Original Signed By  
Les A. Clements  
Supervisor District II

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
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 Forms C-104 must be filed for each pool in multiply completed wells.

#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 2-13-86	Date Compl. Ready to Prod. 3-2-86		Total Depth 2325		P.B.T.D. 2307				
Elevations (DF, RKB, RT, GR, etc.) 3737.4 GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 2168 2172		Tubing Depth 2023				
Perforations 2173-76, 2180-84, 2190-92, 2198-2200, 2204-07 (2 spf)		Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	7 5/8"		315'		200 sx Cl C w/2% CaC				
6 1/2"	4 1/2"		2307'		90 sx self stress				
	2 3/8"		2023						

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 3-2-86	Date of Test 3-5-86	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 12.76	Water - Bbls. 2.32	Gas - MCF TSTM

#### GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size