STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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MOITURINTEIO				
SANTA PE				
FILE		· .		
U.B.O.B.				
LAND OFFICE				
TRANSPORTER	OIL			
THE STORY EN	DAB			
OPERATOR				
PROHATION OFFICE				

OIL CONSERVATION DIVISION P. O. BOX 2088

R BORK

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

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE

Disk

PROHATION OFFICE AUTHORIZATIO	AND IN TO TRANSPORT OIL	AND NATU	RAL GASIST.	# 1	•		
I.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Operator							
Rife Oil Properties, Inc.							
Address				•			
P.O. Box 9437; Ft. Worth, Texas	76107				4.6		
Recson(s) for liling (Check proper box)		Other (Please	explain)		* <u>-</u>		
New Well Change in Transp	orter of:	Change o	of Operator to	be effecti	.ve		
Recompletion Oil	Dry Gas	July 1,	· ·		•		
X Change in Ownership Casinghead C	Condensate				· · · · · · · · · · · · · · · · · · ·		
Silverridge Corporation							
If change of ownership give name 8101 NW 10th; O	kla. City, Ok. 7	73127			•		
and address of previous owner							
H. DESCRIPTION OF WELL AND LEASE							
Lease Name Well No. Pool No	ime, Including Formation	-	Kind of Lease		Lease No.		
Jicarilla 119 1 Tapa	cito Pictured Cli	ffs	State, Federal or Fee	Federal	119		
Location					•		
Unit Letter 0: 790 Feet From The South Line and 1850 Feet From The East							
Line of Section 5 Township 26N	Range 4W	, NMPM	Rio Arriba		County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS							
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)							
				<u> </u>			
Name of Authorized Transporter of Casinghead Gas or D	outhorized Transporter of Casinghead Gas or Dry Gas K Address (Give address to which approved copy of this form is to be sent)						
Northwest Pipeline Corp.	P.O.	Box 8900,	Salt Lake Cit	y, Ut. 84	108		
· · · · · · · · · · · · · · · · · · ·	wp. Roe. Is gas ac	tually connecte Yes	When 1-1-	74			
give location of tanks.							
If this production is commingled with that from any other	lesse or pool, give com	ningling order	number:				
NOTE. Complete Parts IV and V on severe wile if a							

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.

Landman, James H. Blurton
(Title)

June 8, 1987

(Doie)

OIL CONSERVATION DIVISION

APPROVED

BY

SUPERVISOR DISTRICT # 3

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 MULE 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.