

Submit 3 Copies
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 9 05
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

30-039-21609

Operator Snyder Oil Corporation		Well API No. 2160900
Address 1801 California St. Ste 3500, Denver, CO 80202		
Reason(s) for Filing (Check proper box) New Well ☐ Change in Transporter of: Recompletes ☐ Oil ☐ Dry Gas ☐ Change in Operator ☒ Casinghead Gas ☐ Condensate ☐		
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 MCINTYRE <i>in</i>	Well No. <i>1</i> M	Pool Name, including Formation Basin Dakota	Kind of Lease Jicarilla	Lease No. 09-000101
Location Van Letter <u>K</u> : <u>1450</u> Feet From The <u>South</u> Line and <u>1850</u> Feet From The <u>West</u> Line Section <u>11</u> Township <u>26N</u> Range <u>04W</u> NMMP, RIO ARRIBA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Giant Refinery <u>2304810</u>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 258, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Gas Company of New Mexico <u>2304830</u>	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 Naphtha, give location of tanks. Unit <u>K</u> Sec. <u>11</u> Twp. <u>26N</u> Rgn. <u>04W</u>	Is gas actually condensed? <u>Yes</u> When?

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.

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

OIL CONSERVATION DIVISION
NOV 28 1990

Date Approved _____
By Barry Shoup
SUPERVISOR DISTRICT 13
Title _____

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 28 1990
OIL CON. DIV.
DIST. 3

CMD :
OG6WCMP

ONGARD
C104-AUTHORIZATION TO TRANSPORT

09/17/94 07:05:21
OGODJ -EMFF

OGRID Idn : 21042 API Well No : 30 39 21609 Pool Code : 72319
Operator Name : SNYDER OIL CORP *Blanca Meadows*
Prop Name : MCINTYRE Well No : 001M
B.H. Location: UL : K Sec : 11 Twp : 26N Range : 04W Lot Idn :
Prod Method (F/P) : F C104 Aprvl Dte : Gas Conn Dte :
NFO Permit No : NFO Eff Dte : NFO Exp Date :
Remove POD from WC: N Remove Transporter from POD : N

Sel:

Transporter Idn : 9018 Name : GIANT REFINERY
Point of Disp : 2304910 Transporter type (G/O/W) : O
Transporter Idn : 8503 Name : GAS CO OF NEW MEXICO
Point of Disp : 2304930 Transporter type (G/O/W) : G
Transporter Idn : 36401 Name : BOGUS WATER HAULER
Point of Disp : 2304950 Transporter type (G/O/W) : W
Production Test : First Oil Prod Dte : Gas Dlv Date:
Test Date : Tubing Pressure : Choke Size :
Oil(BOPD) : Gas(MCFD) : Water(BPD) :
AOF(MCFD) :

E0005: Enter data to modify or PF keys to scroll

PF01 HELP	PF02	PF03 EXIT	PF04 GoTo	PF05	PF06 CONFIRM
PF07	PF08	PF09 COMMENT	PF10	PF11	PF12 NXTRNSP

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Santa Fe, New Mexico 87504-2088

OPERATOR'S MONTHLY REPORT
Form C-115 - Revised 1/1/89
See Distribution and Code
Information Bottom of Page

Company or Operator GIANT EXPLORATION & PRODUCTION COMPANY Address Box 2810, Farmington, NM Zip 87499 For Month, July 1991 Page 5 of 124

POOL NAME (Underline)

*Lease Name

WELL NO. UNIT SEC. TWP RING

LEASE NAME - Include State Land Lease Number or Federal Lease Number

WELL STATUS

INJECTION
VOLUME
PRESS.

PRODUCTION
BARRELS OF OIL COND. PRODUCED
BARRELS OF WATER PRODUCED
GAS PRODUCED (MCF)

DISPOSITION OF GAS
DAYS PROO
SOLD
TRANS-PORTER
OTHER

DISPOSITION OF OIL
OIL ON HAND AT BEG. OF MONTH
BARRELS TO TRANS-PORTER
TRANS-PORTER
OTHER
OIL ON HAND AT END OF MONTH

BISTI LOWER GALLUP

BISTI

NOO-C-14-20-5250

2 0-23-25N-11W

F

121

1933

81

27.5

0

81

U

210

193 Giant

13

*

125

*bbls of water drained from production tank

DISTRIBUTION

Original OCD Santa Fe
One Copy OCD Dist. Office
in which lease is located
One Copy to Transporter (s)
DATE DUE
To be postmarked by 24th day of next succeeding month.

STATUS CODE

F.....FLOWING
P.....PUMPING
G.....GAS LIFT
S.....SHUT IN
T.....TEMP ABANDONED
I.....INJECTION
D.....DISCONTINUED

OTHER GAS DISPOSITION CODE

X.....USED OFF LEASE
D.....USED FOR DRILLING } DETAIL
G.....GAS LIFT } FROM
L.....LOST (MCF ESTIMATED) C-111
E.....EXPLANATION ATTACHED
R.....REPRESSURING OR
PRESSURE MAINTENANCE
V.....VENTED
U.....USED ON LEASE

OTHER OIL DISPOSITION CODE

C.....CIRCULATING OIL
S.....LOST
E.....EXPLANATION ATTACHED
T.....THEFT

I HEREBY CERTIFY THAT THE INFORMATION GIVEN IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE

Earlene J. Bickford (505) 326-3325

Administrative Manager

POSITION

AUG 23 1991

SIGNATURE

DATE