Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240
DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

P/O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I. TO TRANSPORT OIL AND NATURAL GAS	
Operator Snyder Oil Corporation	Weil API No. 2161800
Address 1801 California St. Ste 3500, Denver,	
Reason(s) for Filing (Check proper box) Other (Please explain)	
New Well Change in Transporter of:	
Recompletion Oil Dry Gas	
Change in Operator	P.O. Box 2038, Farmington, NM 87499
If change of operator give name CO l'ullidus Eller gy COI p. 1.0. Box 2000, Latitiving control and address of previous operator	
II. DESCRIPTION OF WELL AND LEASE	
Lease Name Well No. Pool Name, Including	
NORTHWEST TA Blanco Me	esaverde Jicarilla 09-000119
Location	
Unit Letter 0 : 1190 Feet From The South Line and 1450 Feet From The East Line	
Section 07 Township 26N Range 04V	N NMPM, RIO ARRIBA County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil	
Giant Refinery	P.O. Box 256, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
Northwest Pipeline Corp.	3935 F. 30th St., Farmington, NM 87
If well produces oil or liquids, Unit Sec. Twp. Rgs.	Is gas actually connected? When?
give location of tanks.	Yes
If this production is commingled with that from any other lease or pool, give commingling order number:	
VI. OPERATOR CERTIFICATE OF COMPLIANCE	OU CONCEDIATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation	OIL CONSERVATION DIVISION
Division have been complied with and that the information given above	NOV 2 8 1 990
is true and complete to the best of my knowledge and belief.	Date Approved
Patrinia Somoni by Olm	3 (A)
Signature Patricia Tognoni Engr Tech	SUPERVISOR DISTRICT #3
Printed Name Title .10/01/90 303-292-9100	Title
Date Telephone No.	

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.

