

Submit 5 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**

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

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

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

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

<b>I.</b>	
Operator Snyder Oil Corporation	Well API No. 2353300
Address 1801 California St. Ste 3500, Denver, CO 80202	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
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 HURON AE	Well No. 4E	Pool Name, Including Formation Basin Dakota	Kind of Lease Jicarilla	Lease No. 09-000101
Location Unit Letter <u>A</u> : <u>800</u> Feet From The <u>North</u> Line and <u>790</u> Feet From The <u>East</u> Line Section <u>02</u> Township <u>26N</u> Range <u>04W</u> , NMPM, RIO ARRIBA County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Giant Refinery	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Gas Company of New Mexico	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 liquids, give location of tanks.	Unit A	Sec. 02	Twp. 26N	Rge. 04W	Is gas actually connected? Yes	When? 5/21/86

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

**OIL CONSERVATION DIVISION**

Date Approved NOV 26 1990  
By [Signature]  
Title SUPERVISOR DISTRICT #3

**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 26 1990  
OIL CON. DIV  
DIST. 3