STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

(Date)-

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DISTRIBUTION			1
SANTA PE		1	1
FILE			
u.s.a.a.		1	_
LAMB OFFICE			
TRAUSPORTER	OIL		
	-		
OPERATOR			
PROBATION OFFICE		1	

OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE

Form C-104 Revised 10-01-78

AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GASO			
Operator	2001. 3			
Corrida Oils Inc.				
Address				
P.O. Box 740516, Dallas, TX 75374-051	6			
Reason(s) for filing (Check proper box)	Other (Please explain)			
New Well Change in Transporter of:				
Roccompletion X OII	Dry Gas			
Casinghead Gas	Condensate			
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL AND LEASE	1			
Lease Name Well No. Pool Name, Including	Formation Kind of Lease Lease	No		
Badlands Federal 1 Bisti Lower				
Location .		<u>.JO</u>		
Unit Letter A : 660 Feet From The North	Line and . 660 Feet From The East			
Line of Section 13 Township 25N Range	13W , NMPM, San Juan	ent y		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATUR	AT CAS			
Name of Authorized Transporter of Oll X or Condensate	Address (Give address to which approved copy of this form is to be sent)			
Petro Source Refining Corporation				
Name of Authorized Transporter of Casinghead Gas ar Dry Gas	P.O. Box 27 Salt Lake City Utah 84110 Address (Give address to which approved copy of this form is to be sent)			
Gas used on lease.	Petro Source phone # (303) 565-4110			
If well produces oil or liquids, Unit Sec. Twp. Rgs. give location of tanks. I 13 25N 13W	Is gas actually connected? When			
If this production is commingled with that from any other lease or por				
NOTE: Complete Parts IV and V on reverse side if necessary.	,			
11012. Complete lais IV and V on reverse state if necessary.				
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION			
Thereby carrify they the rules and cardialize of the Oil Co	MAY 0/0/1007			
I hereby certify that the rules and regulations of the Oil Conservation Division has been complied with and that the information given is true and complete to the best.	APPROVED			
my knowledge and belief.	BY Srank . Savey			
	AUIOFOLIUM			
	TITLE SUPERVISOR DISTRICT # 3			
Prince the the	This form is to be filed in compliance with RULE 1104.			
(Signature)	If this is a request for allowable for a popular delited at a			
	well, this form must be accompanied by a tabulation of the devi- tests taken on the well in accordance with RULE 111.	عناد		
(Tule)	All sections of this form must be filled out countries.	··		
5/26/87	able on new and recompleted wells.			

Fill out only Sections L. H. III, and VI for changes of coner, well name or number, or transporter, or other such change of conditions Separate Forms C-104 must be filed for each pobl in multiply completed wells.