NEW MEXICO OIL CONSERVATION COMMISSION 15rm C-104 DISTRIBUTION Supersedes Old CA01 and C-110 REQUEST FOR ALLOWABLE SANTAFE Liftective 1-1-65 AND FILE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS u.s.G.s. LAND OFFICE FRANSPORTER CPERATOR FRORATION OFFICE Consulor CONSOLIDATED OIL & GAS, INC. 1860 Lincoln Street, Lincoln Tower Bldg., Denver, Colorado 80203 Other (Please explain) Reason(s) for tiling (Check proper box) Change in Transporter of: New Well Oil Dry Gas Recompletion Castnahead Gas Change in Ownership If change of ownership give name and address of previous owner 1. DESCRIPTION OF WELL AND LEASE Kind of Lease State, (Federal) or Fee Ham BAlland Pietured ANGER Location 930 Feet From The_ Line and Unit Letter NMPM, Range Township 1. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Cil Plaleau Address (Give address to which approved copy of this form is to be sent) /First International Bldg., Suite 1800 Dallas, Texas 75270 Is gas actually connected? When Name of Authorized Transporter of Casinghead Gas _____ or Dry Gas X Gas Company of New Mexico Rge. Sec. Twp. It well produces oil or liquids, give location of tanks. 126 Yes 26 If this production is commingled with that from any other lease or pool, give commingling order number: V. COMPLETION DATA Same Res'v. Diff. Res'v Workover Deepen Plug Back Gas Well New Well Designate Type of Completion - (X) P.B.T.D. Total Depth Date Compl. Heady to Prod. Date Spudded Tubing Depth Top Oil/Gas Pay Name of Producing Formation Pool Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT **DEPTH SET** CASING & TUBING SIZE HOLE SIZE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Cheke Size Casing Pressure Length of Test Tubing Pressure Water - Bbls. Oil - Bbls. Actual Prod. During Test SEP 7 1976 GAS WELL OIL CONTERM OF Bbls. Condensate/MMC Actual Frod. Test-MCF/D Length of Test

Testing Method (pitot, back pr.) Tubing Pressure Casing Pressure

I hereby certify that the rules and regulations of the Oil Conservation

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Araldine Longami

eptember 1,1976

Asst. Production Acct.

VI. CERTIFICATE OF COMPLIANCE

OIL CONSERVATION COMMISSION

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DIST

APPROVED _______ SEP 7 1976 _____, 19 _____

BY_____

TITLE SUPERVIOLE

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 RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out Sections I, II, III, and VI only 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 multiple completed wells.