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STATE OF NEW MEXICO  
 ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION  
 P. O. BOX 2088  
 SANTA FE, NEW MEXICO 87501

Form C-104  
 Revised 10-01-78  
 Format 06-01-83  
 Page 1

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SANTA FE	✓
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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL ✓ GAS
OPERATOR	✓
PRORATION OFFICE	

REQUEST FOR ALLOWABLE  
 AND  
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
 Cibola Energy Corporation

Address  
 P. O. Box 1668, Albuquerque, New Mexico 87103

Reason(s) for filing (Check proper box)  
 New Well  
 Recompletion  
 Change in Ownership

Change in Transporter of:  
 Oil  
 Casinghead Gas  
 Dry Gas  
 Condensate

Other (Please explain)  
 effective 7-1-87

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name J. P. White A	Well No. 1	Pool Name, including Formation Race Track San Andres	Kind of Lease State, Federal or <u>Fee</u>	Lease No.
Location Unit Letter <u>D</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>19</u> Township <u>10S</u> Range <u>28E</u> , NMPM, <u>Chaves</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation Permian (Eff. 9/1/87)	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, TX 79702
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> PFS	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit C Sec. 19 Twp. 10S Rge. 28E	Is gas actually connected? <u>yes</u> When <u>12-8-87</u>

If this production is commingled with that from any other lease or pool, give commingling order number: Part ID-3

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Karen Tvede Karen Tvede  
 (Signature)  
 Geologist  
 (Title)  
 6-11-87  
 (Date)

OIL CONSERVATION DIVISION

APPROVED JUN 29 1987, 19 \_\_\_\_\_  
 BY \_\_\_\_\_ Original Signed By  
 Les A. Clements  
 TITLE \_\_\_\_\_ Supervisor District II

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 only Sections I, II, III, and VI 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.