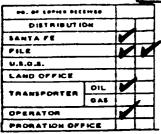
RECEI' D BY

JUN 24 1987

O. C. D. STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENTSIA, OFFICE

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

Separate Forms C-104 must be filed for each pool in multi



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

DECREET FOR ALLOWARIE

OPERATOR A	ND
	PORT OIL AND NATURAL GAS
I	
Cibola Energy Corporation	
P. O. Box 1668, Albuquerque, New M	Mexico 87103
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of: Recompletion	effective 7-1-87
If change of ownership give name and address of previous owner	
II. DESCRIPTION OF WELL AND LEASE Lease Name	k San Andres State, Federal or Fee
Location	
Unit Letter M : 330 Feet From The South Lir	re and 330 Feet From The West
Line of Section 20 Township 10S Range	28E . NMPM. Chaves Count
TRANSPORTER OF OIL AND NATURAL	I GAS
Mane of Authorized Transporter of Oil XX or Condensate	Variety (Old Project of Child
Permian (Eff. 9 / 1	P. O. Box 3119, Midland, TX 79702
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
Tinti Sec. Twp. Rge.	Is gas actually connected? When
If well produces oil or liquids, M 20 10S 28E	1 10 x 83
If this production is commingled with that from any other lease or pool,	give commingling order number: Post ID-3
Duta IV on concre side if necessary	7-3-87
NOTE: Complete Parts IV and V on reverse side if necessary.	che LT! NA
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED JUN 2 9 1987 . 19
been complied with and that the information given is true and complete to the best of	Original Staned By
my knowledge and belief.	Les A. Clements
	TITLESupervisor District H
	This form is to be filed in compliance with RULE 1104.
Karen Tulde Karen Tvede (Signature)	If this is a request for allowable for a newly drilled or deepe well, this form must be accompanied by a tabulation of the devia tests taken on the well in accordance with RULL 111.
Geologist (Tule)	All sections of this form must be filled out completely for all able on new and recompleted wells.
6-11-87	Fill out only Sections I. H. III, and VI for changes of own
(Deset	well name or number, or transporter, or other such change of condit

Separate Fo completed wells.