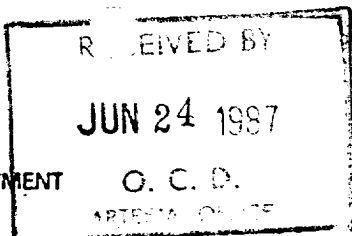


STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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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

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)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate
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	Well No. 2	Pool Name, Including Formation Race Track San Andres	Kind of Lease State, Federal or <u>Fee</u>	Lease No.
Location				
Unit Letter P	660	Feet From The South	Line and 660	Feet From The East
Line of Section 18	Township 10S	Range 28E	NMPM,	Chaves

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	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 checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Pecos River Gas Plant Ltd.	Address (Give address to which approved copy of this form is to be sent) Box 4000 The Woodlands, TX 77380-3
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. P 18 10S 28E
Is gas actually connected? Yes	When 10-8-83

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

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

JUN 29 1987

APPROVED \_\_\_\_\_, 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 deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

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