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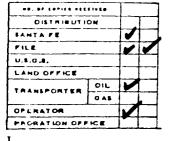
JUL -7 1986

O. C. D.

ARTESIA, OFFICE

OTE CONSERVATION DIVISION
P. O. BOX 2088

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



STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1.						
Cibola Energy Corpora		CASINGHEAD GAS MUST NOT B				
Address			FLARED AFTER			
P. O. Box 1668, Albuq	uerque, NM 8	37103	103 UNLESS AN EXCEPTION TO:			
Reason(s) for filing (Check proper box)			Other (Please	explainRULE 306 IS OBTAIN	ED	
New Well Change in Transporter of:			Request testing allowable of 2480 Bbls for July, 1986			
Recompletion Oil Dr						
Change in Ownership Cas	inghead Gas C	ondensate				
If change of ownership give name and address of previous owner						
II. DESCRIPTION OF WELL AND LEASE					 .	
Louse Name Well No	. Pool Name, Including F		1	Kind of Lease	Leose No.	
Mabel 8	LE Ranch Sa	n Andr	es	State, Federal or Fee 1'66	_l	
Location B 330 Feet Fr	om The North Lir	16 and 16	50	Feet From The East		
Line of Section 30 Township 10	S Range	28E	, ИМРМ,	Chaves	County	
III. DESIGNATION OF TRANSPORTER OF Name of Authorized Transporter of CII Y or S Navajo Crude Oil Purchasin Name of Authorized Transporter of Casinghead Gas (Pecos River Gas Plant, Ltd If well produces oil or liquids, give location of tanks.	Sondensate	Address (G P. O. Address (G P.O. B	Box 159		LO to be sent)	
If this production is commingled with that from a		give commi	ngling order	number:	·	
NOTE: Complete Parts IV and V on reverse	side if necessary.	••				
VI. CERTIFICATE OF COMPLIANCE			OIL CONSERVATION DIVISION			
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			APPROVED, 19			
my knowledge and belief.		BY				
		TITLE.				
Karen Vedekaren Tvede (Signature) Geologist (Title) 7/3/86 (Date)			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.			

IV. COMPLETION DATA				
Designate Type of Complet	ion - (X) Oll Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
6-7-36	7-2-86	2282	2274'	
Elevations (DF, RKB, RT, GR, etc.) 3749.2 GR	Name of Producing Formation San Andres	Top Oil/Gas Pay	Tubing Depth 2120'	
2248, 2210-	-18, 2188-92, 2174-8	2 (2 spf)	Depth Casing Shoe	
	TUBING, CASING, A	ND CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CHIMENT	
12 1/4"	18 5/8"	315'	255 sx Class C	
6 1/2"	4 1/2"	2275'	90 sx Class C	
	235	1 2120		
V. TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be able for this		oil and must be equal to or exceed top allow-	
Date First New Oil Run To Tanks 7-2-86	7-7-8 6	Producing Method (Flow, pump, cas lift, etc.)		
Longin of Test	Tubing Pressure	Casing Preseure	Chore Size	
Actua, Prod. During Test	Oti-Bbis.	Water - Bble.	Gas-MCF	
478	1 178	1 0	75.7%	
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-im)	Cosing Pressure (Shut-1B)		
The second secon	,	(Choke Size	