

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.B.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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  
CITY OIL CORPORATION *Company*  
Address  
6100 Wilshire Blvd., Suite 1400 Los Angeles, CA 90048  
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)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE  
Lease Name: SHERIDAN Well No.: 1 Pool Name, including Formation: VADA PENN Kind of Lease: State, Federal or Fee FEE Lease No.:  
Location  
Unit Letter: M : 660 Feet From The SOUTH Line and 660 Feet From The WEST  
Line of Section: 13 Township: 9-S Range: 33-E , NMPM, LEA County:

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS 2500 Allianz Financial Centre  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
JM PETROLEUM CORPORATION Address (Give address to which approved copy of this form is to be sent)  
2323 Bryan St. LB 185 Dallas, TX 75  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐  
WARREN PETROLEUM CORPORATION Address (Give address to which approved copy of this form is to be sent)  
P.O. Box 1589 Tulsa, OK 74102  
If well produces oil or liquids, give location of tanks. Unit: M Sec.: 13 Twp.: 9 Rge.: 33 Is gas actually connected? YES When:

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.

*Paul Salty*  
VICE PRESIDENT  
(Signature)  
(Title)  
1-20-89  
(Date)

OIL CONSERVATION DIVISION  
FEB 28 1989  
APPROVED \_\_\_\_\_, 19\_\_\_\_\_  
BY: *Paul Kautz*  
Geologist  
TITLE \_\_\_\_\_  
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.

**RECEIVED**

**FEB 27 1989**

**OCD  
HOBBS OFFICE**