Submit 5 Copies Appropriate District Office			Sta	ate of }	New Mexic	0				
DISTRICT	E	Energy, M	linerals a	and Na	itural Reso	wrces Depar	ttment			Form C-104
P.O. Box 1980, Hobbs, NM 88240										Revised 1-1-89 See Instructions
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	(	DIL C	ONSE		ATION	DIVISI	ION			at Bottom of Page
DISTRICT III		Sar	ita Fa N	P.O. E	lox 2088					
1000 Rio Brazos Rd., Aziec, NM 874	10					7504-2088				
I.	REQU	EST FC	RALL	OWA	BLE AND		BIZATI			
Operator		O TRA	NSPOF	IO TF	L AND N	AUTAO	GAS			
SNYDER OIL CORPO								Well API No	D,	
A MALE Cas										
777 MAIN STREET, Reason(s) for Filing (Check proper box	SUITE 2	500	FO	RT I	NORTH,	TEXAS	7610	2		
New Well						Wher (Flease es	rplain)	۷		
Recompletion	Oil	Change in T	ransporter Dry Gas	• of:						
Change in Operator	Casioghead	_	Condensate	•						
f change of operator give name ind address of previous operator	MURPHY O	PERAT	ING C							
L DESCRIPTION OF WEL		6 F		ond	MAILUR	<u>N</u>				
Lesse Name Charles	11		nol Name	Includ	ng Formation					
Jennifer <sub>A</sub> QSA Unit	<u>Sec.19</u>	2	Chave	eroo	San A			Kind of Lease State, Federal	C Trans	Lease No.
Cocation	1 /				Juli A	uldres				NM-0164650
Unit Letter B	: <b>6</b> 60	0 F	eet From J	The	<u>N</u> Li	ipe and 2.	310	Feet From	-	۶
Section 19 Towns	ship 7S	р		245				rect rrom	1 The	Line
				<u>34E</u>		NMPM, RC	<u>)0 SE</u>	VELT		County
I. DESIGNATION OF TRA lame of Authonized Transporter of Oil	NSPORTER	OF OIL	AND N	ATU	RAL GAS	5				
		r Condensat	¢	]	Address (Gi	ive address to 1	which app	roved copy of	this form	is to be send
lame of Authorized Transporter of Casi	inghead Gas	~	Dry Gas							
Indent NGL of	ne	<u> </u>	Diy Gat		Address (Gi	we address to v	which app	roved copy of	this form	is to be sens)
well produces oil or liquids, ve location of tanks.	Unit Se	∞.  T	mp.	Rge.	Is gas actual	lly connected?		When ?		
this production is commingled with the			1					Then /		
		•								
V. COMPLETION DATA	a nom any other	lease or poo	d, give cor	mningli	ng order nurr	nber:	l			
DATA		lease or poo					l 			
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S: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111. 2) All sections of this form must be filled out for allowable on new and recompleted wells.

3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such ables

RECEIVED

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SEP 3 0 1991 Conge House consecutive