

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

Operator
Circle Ridge Production, Inc.

Address
c/o Oil Reports & Gas Services, Inc., P.O. Box 755, Hobbs, N.M. 88241

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

Effective 3/19/88

(Change of ownership give name and address of previous owner)
General Operating Co., Suite 1007 Ridglea Bank Bldg., Ft. Worth, Tx 76116

I. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Drickey Queen</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Caprock Queen</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>None-03927</u>
Sand Unit Tract <u>13</u>				
Location				

Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West

Line of Section 34 Township 13S Range 31E , NMPM, Chaves County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>None - Injection Well</u>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When

(If this production is commingled with that from any other lease or pool, give commingling order numbers)

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

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.

Chas. H. Haller
(Signature)
Agent
(Title)
3/24/88
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 29 1988, 19
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT I SUPERVISOR

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 Form C-104 must be filled for each pool in multiply completed wells.

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MAR 25 1988
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HOBBS OFFICE