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 05-01-83 Page 1

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| Comparison | PRODUCTION OFFICE | AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS | | | | | |
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| Received Formation Change in Transporter of Condenses Condenses Condenses Condenses Effective 11/1/86 | Circle Ridge Production I | nc. | | | | | |
| Research Set Filling (Check proper bar) Change in Transporter of: | Address | | | | | | |
| Change in Transporter of: OII Dry Gas Dry Gas Condensate Dry Gas Condensate Dry Gas Dry Ga | c/o Oil Reports & Gas Ser | vices, Inc., P. O. | Box 755. | Hobbs N | 1 88241 | | |
| If change of ownership give narve and address of previous owner Creat Western Drilling Company, P. O. Box 1659, Midland, Texas 79701 | | Change in Transporter of: | | Oluer (17 lease | EEPIBIA | | |
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| II. DESCRIPTION OF WELL AND LEASE Lease Name | If change of ownership give name Greand address of previous owner Great | at Western Drilling | Company, | P. O. Bo | x 1659. Midland | d. Texas | 79701 |
| Rock Queen Unit Sec. 36 | | | | | | | |
| Rock Queen Unit Sec. 36 13 Caprock Queen Store, Federal or Fee State B-9541 Location Unit Letter M : 660 Feet From The South Line and 660 Feet From The West Line of Section 36 Township 13S Ronge 31E , NMPM. Chaves County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Rame of Authorized Transporter of Oil XX or Condensore P. O. Box 2528, Hobbs, NM 88241 Hence of Authorized Transporter of Consingheed Gos Or Dry Gas Address (Give address to which approved copy of this form is to be sent) Hence of Authorized Transporter of Consingheed Gos Or Dry Gas Address (Give address to which approved copy of this form is to be sent) Hence of Authorized Transporter of Consingheed Gos Or Dry Gas Address (Give address to which approved copy of this form is to be sent) Hence of Authorized Transporter of Consingheed Gos Or Dry Gas Address (Give address to which approved copy of this form is to be sent) Hence of Authorized Transporter of Consingheed Gos Or Dry Gas Address (Give address to which approved copy of this form is to be sent) Hence of Authorized Transporter of Consingheed Gos Or Dry Gas Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, NM 88241 Address (Give address to which approved copy of this form is to be sent) No I square Give address to which approved copy of this form is to be sent) No I square Give address to which approved copy of this form is to be sent) No I square Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, NM 88241 No I square Give address to which approved copy of this form is to be sent) No I square Give address to which approved copy of this form is to be sent) No I square Give address to which approved copy of this form is to be sent) No I square Give address to which approved copy of this form is to be sent) No I square Give address to which approved copy of this form is to be sent) No I square Give address to which approved copy of this form is to be sent) No I square Give address to w | | EASE Well No. Pool Name, Includin | g Formation | | Kind of Lease | | Lease No. |
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| Line of Section 36 Township 13S Range 31E , NMPM, Chaves County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil EX or Condensate Page 14 Address (Give address to which approved copy of this form is to be sent) Texas—New Mexico Pipe Line Company Name of Authorized Transporter of Cosinghead Gos or Dry Gos Address (Give address to which approved copy of this form is to be sent) Hame of Authorized Transporter of Cosinghead Gos or Dry Gos Address (Give address to which approved copy of this form is to be sent) If well produces oil or liquide, Unit Sec. Twp. Rgo. Is que countingling connected 7, when 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. OIL CONSERVATION DIVISION APPROVED NOV 1 9 198C ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR 1 TITLE This form is to be filled in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened wells, it form must be accompanied by a tabulation of the deviation to the set on the well is accordance with RULE 111. All sections of this form sust be filled out completely for allowable on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of condition. Separate Forms C-104 must be filled for each pool in multiply | | 1 15 Caprock Oue | -11 | | | | |
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