STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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SANTA FE		\top	
FILE			1
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LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION 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

Operator Circle Ridge Production	Inc.				30-005-00937		
c/o Oil Reports & Gas Se	rvices	. Inc., P. O.	Box 755.			······································	
Reason(s) for filing (Check proper box)		,					
New Well	Change	in Transporter of:		Other (Please explain)			
Recompletion	X ou		Dry Gas Effective 2/1/88				
Change in Ownership	Cas	Inghead Gas	Condensate				
If change of ownership give name and address of previous owner							
II. DESCRIPTION OF WELL AND L	EASE						
Lease Name	1 -	Pool Name, Including			Kind of Lease	Lease No.	
Rock Queen Unit Sec. 36	3	Caprock Quee	n		State, Federal or Fee State	B-9541	
Unit Letter C : 660	_ Feet Fro	om The North	_ine and	1980	Feet From TheWest		
Line of Section 36 Townshi	_p 13	SS Range	31E	, NMPM	Chaves	County	
Name of Authorized Transporter of Oil X Navajo Refining Company Name of Authorized Transporter of Casingho If well produces oil or liquids, give location of tanks. If this production is commingled with the	or C	or Dry Gas	P. O. Address (Box 159, Give address to	<u> </u>		
NOTE: Complete Parts IV and V on	reverse s	ide if necessary.	ii	01.00	24/055144514		
VI. CERTIFICATE OF COMPLIANCE				OIL CONSERVATION DIVISION			
hereby cettify that the rules and regulations of the Oil Conservation Division have seen complied with and that the information given is true and complete to the best of my knowledge and belief.				- EB 4 - 1988	19		
			TITLE	ORIG	DISTRICT I SUPERVISOR	N	
Wanna Waller		Thi	This form is to be filed in compliance with RULE 1104.				
(Signature) Agent		If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
(Title) 2/3/88			All able on	All sections of this form must be filled out completely for allowable on new and recompleted wells.			
(Date)			well nam	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.			
			Sepa	rate Forma d wells.	C-104 must be filed for each po	ol in multiply	