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

Separate Forms C-104 must be filed for each pool in multiply

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Circle Ridge Production Inc. 30 - 005 - 0093 8	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS								
Circle Ridge Production Inc. 30 - 005 - 00988 Address (Co. 011 Reports 5 Gas Services, Inc., P. O. Box 755, Hobbs, New Mexico 88241 New Well New We	I.						·		
Matters C/O 011 Reports & Gas Services, Inc., P. O. Box 755, Hobbs, New Mexico 88241	1						30-005-6-0	, d	
Co O11 Reports 5 Gas Services, Inc., P. O. Box 755, Hobbs, New Mexico 88241		Inc.				· · · · · · · · · · · · · · · · · · ·	20 003 0073	5 8	
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New Well Change in Transporter of: Dry Ges Casincheed Cas Casincheed Casinc		ervices, I	nc., P.	о. во	x /55.				
It change of ownership give name and address of previous owner Great Western Drilling Company, P. O. Box 1659, Midland, Texas 79701 II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Stote, Federal or Fee State B-9541 Lease Name Rock Queen Unit Sec. 36 2 Caprock Queen Stote, Federal or Fee State B-9541 Lease No. Lease No. Rock Queen Unit Sec. 36 2 Caprock Queen Stote, Federal or Fee State B-9541 Lease No. Lease No. Rock Queen Unit Sec. 36 3 Caprock Queen Stote, Federal or Fee State B-9541 Lease No. Lease No. Rock Queen Unit Sec. 36 3 Caprock Queen Stote, Federal or Fee State B-9541 Lease No. Lease No. Rock Queen Unit Letter B		Change in '	Transporter of:	:					
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II. DESCRIPTION OF WELL AND LEASE Lease Name Rock Queen Unit Sec. 36 2 Caprock Queen State, Federal or Fee State B-9541 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 Castinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) None - Injection Well Name of Authorized Transporter of Castinghead Gas or Dry Gas at Implementation of the Castinghead Gas or Dry Gas at Implementation of the Castinghead Gas or Dry Gas at Implementation of the Castinghead Gas or Dry Gas at Implementation of the Castinghead Gas or Dry Gas at Implementation of the Castinghead Gas or Dry Gas	XX Change in Ownership	Casing	head Gas	c	ondensate	ĺ	·		
Lease Name Rock Queen Unit Sec. 36 2 Caprock Queen Store, Federal or Fee State B-9541	and address of previous ownerGI		rn Drill:	ing C	ompany,	P. O. Bo	ox 1659, Midland, Texa	s 79701	
Rock Queen Unit Sec. 36 2 Caprock Queen State Federal or Fee State B-9541		Well No. F	ool Name, Inc.	luding F	ormation		Kind of Lease	Lease No.	
Unit Letter B : 660 Feet From The North Line and 1980 Feet From The East Line of Section 36 Township 13S Range 31E .NMPM, Chaves County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Nome of Authorized Transporter of Oil or Condensate Authorized Transporter of Oil or Condensate Authorized Transporter of Cosinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) None - Injection Well Name of Authorized Transporter of Cosinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) If well produces oil or liquide, give location of transa. 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. Description of the form is to be filled 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 accompliance with RULE 1104. All sections of this form sums to be filled out completely for ellowable on new and recompleted wells. If this is a request for allowable for a newly drilled out completely for ellowable on new and recompleted wells. It is not not well in accompletely for ellowable on new and recompleted wells. Fill out only Sections I. II. III. High VI for changes of owner, Fill out only Sections I. II. III. III. and VI for changes of owner,		- i - i -		_			State, Federal or Fee State	B-9541	
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