STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

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DISTRIBUTION			T
SANTA PE		1	
FILE		1	
U.S.G.S.		1	Π
LAND OFFICE		1	
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

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 Forms C-104 must be filed for each pool in multiply completed wells.

REQUEST FOR ALLOWABLE

AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS I.				
Circle Ridge Production Inc.	30-005-00945			
c/o Oil Reports & Gas Services, Inc., P. O. B				
Reeson(s) for filing (Check proper box)	Other (Please explain)			
New Well Change in Transporter of: Recompletion X Oil Dry Gas Effective 2/1/88 Change in Ownership Casinghead Gas Condensate				
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL AND LEASE				
Rock Queen Unit Sec. 36 Well No. Pool Name, Including I				
Location A 660 North 660 East Unit Letter : Feet From The Line and Feet From The				
Line of Section 36 Township 13S Range	31E , NMPM, Chaves County			
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent) P. O. Box 159, Artesia, NM 88210 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. E 36 13S 31E	Is gas actually connected? When No			
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	OIL CONSERVATION DIVISION			
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED FEB 4 - 1988 . 19			
complied with and that the information given is true and complete to the best of knowledge and belief. ORIGINAL SIGNED BY JERRY SEXTOR				
	DISTRICT I SUPERVISOR			
1,7	This form is to be filed in compliance with RULE 1104.			
If this is a request for allowable for a newly drill (Signature) well, this form must be accompanied by a tabulation of				
Agent (Title)	All sections of this form must be filled out completely for allowable on new and recompleted wells.			
2/3/88	FULL and Only Constant E. W. W. and W. for changes of aware			

TEB 3 1988