

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Formal 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., Box 755, Hobbs, NM 88241

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recumpletion	<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

If change of ownership give name and address of previous owner General Operating Company, Box 755, Hobbs, NM 88241

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>West Cap Queen</u>	Well No. <u>3</u>	Pool Name, including Formation <u>Caprock Queen</u>	Kind of Lease <u>NM-080123</u>	Lease Above
Sand Unit Tract <u>9</u>			State, Federal or Fee <u>Federal</u>	
Location	Unit Letter <u>G</u>	: <u>2310</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u>		
Line of Section <u>21</u>	Township <u>14 S</u>	Range <u>31 E</u>	NMPM, <u>Chaves</u>	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>Texas-New Mexico Pipeline Company</u>	<u>P.O. Box 2528, Hobbs, NM 88240</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 <u>P</u> Sec. <u>17</u> Twp. <u>14S</u> Rge. <u>31E</u>
	Is gas actually connected? <u>No</u> When

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.

Wanda Haller  
(Signature)

Agent

(Title)

3/23/88

(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 24 1988, 19

BY Orig. Signed by  
Paul Kautz  
Geologist

TITLE

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