| STATE OF NEW MEXICO   | :N1  |   | Form C-10<br>Revised 10<br>Format 06   | 0-01-78              |
|---|--|---|--|----------------------|
|   | OIL CONSERVATION DIVISION  |   | Page 1   | 01-03                |
| SANTA FE  |  |   | -  |                      |
| F1LE  | SANTA FE, NEW MEXICO 87501   |   |  |                      |
| U.8.0.A.  | SANTA FE, NEW ME   |   |  |                      |
| LAND OFFICE   |  |   |  |                      |
| TRANSPORTER BAS   | REQUEST FOR ALLOWABLE  |   |  |                      |
| OPERATOR  | AND  |   |  |                      |
| FRORATION OFFICE  |  |   |  |                      |
|   |  |   |  |                      |
| Operator  |  |   |  |                      |
| Circle Ridge Produc   | tion. Inc.   | 30  | 2-005-0111   | 5                    |
| Adress  |  |   |  |                      |
| c/o Oil Reports & G   | as Services, Inc., Box 755, H  | lobbs, NM 88241   |  |                      |
| lesson(s) for filing (Check proper bo   |  | Other (Please explain)  |  |                      |
|   |  | Effective   | 2 / 0 /00  |                      |
| New Well  |  | LIIECUIVE   | 3/19/00  |                      |
|   |  | • • • • • • •   |  |                      |
| Recompletion  |  | •   |  |                      |
| Recompletion<br>Change in Ownership<br>change of ownership give name<br>ad address of previous owner  | General Operating Company, E   |   | 88241  |                      |
| Change in Ownership<br>change of ownership give name<br>ad address of previous owner<br>DESCRIPTION OF WELL AI  | General Operating Company, E   | n Kind of L   | _ease  | Lease No             |
| Change in Ownership<br>change of ownership give name<br>ad address of previous owner  | General Operating Company, E   | n Kind of L   |  | Lease No             |
| Change in Ownership<br>change of ownership give name<br>ad address of previous owner<br>DESCRIPTION OF WEIL AI<br>cross Name West Cap Queen<br>Sand Unit Tract 10   | General Operating Company, E   | n Kind of L   | _ease  | Lease No             |
| Change in Ownership<br>change of ownership give name<br>ad address of previous owner<br>DESCRIPTION OF WELL AI<br>cesse Name West Cap Queen<br>Sand Unit Tract 10<br>seculon  | General Operating Company, E   | n Kind of L<br>State, Fe  | _ease  |                      |
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| Change in Ownership<br>change of ownership give name<br>ad address of previous owner<br>DESCRIPTION OF WEIL AI<br>cose Name West Cap Queen<br>Sand Unit Tract 10<br>costion<br>Unit Letter D;   | Casinghead Gas Condense<br>General Operating Company, E<br>ND LEASE<br>Well No. Pool Name, including Formatio<br>1 Caprock Queen   | ne<br>kox 755 a Hobbs a M<br>Kind of L<br>State, Fe<br><u>660</u> Feet Fi   | _ease<br>oderal or Fee Fee<br>rom TheWest  |                      |
| Change in Ownership<br>change of ownership give name<br>address of previous owner<br>DESCRIPTION OF WEIL AI<br>cross Name West Cap Queen<br>Sand Unit Tract 10<br>contine<br>Unit Letter  | Casinghead Gas Condense<br>General Operating Company, E<br>ND LEASE<br>Well No. Pool Name, including Formatio<br>1 Caprock Queen<br>Caprock Queen<br>Capr   | n Kind of L<br>State, Fe<br><u>660</u> Feet Fi<br>, NMPM, Cha   | Lease<br>Inderal or Fee Fee<br>rom The West  | Count                |
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| Change in Ownership<br>change of ownership give name<br>ad address of previous owner<br>DESCRIPTION OF WELL AL<br>cose Name West Cap Queen<br>Sand Unit Tract 10<br>  | Casinghead Gas Condense<br>General Operating Company, E<br>ND LEASE<br>Well No. Pool Name, including Formatio<br>1 Caprock Queen<br>60 Feet From The North Line and<br>ownship 14 S Range 31 E<br>SPORTER OF OIL AND NATURAL GAS<br>II or Condensate Addre   | n Kind of L<br>Nox 755 Hobbs M<br>Kind of L<br>State, Fe<br>660 Feet Fi<br>, NMPM, Cha  | Lease<br>Inderal or Fee Fee<br>rom The West  | Count                |
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## **W.** CERTIFICATE OF COMPLIANCE

Receby certify that the rules and regulations of the Oil Conservation Division have funce complied with and that the information given is true and complete to the best of une knowledge and belief.

Agent (Title) 3/23/88 (Date)

| O         | IL CONSERVATION DIVISION<br>MAR 2 4 1988 |  |
|-----------|--|--|
| APPROVED_ | Orig. Signed by                          |  |
| 8Y        | Paul Kautz                               |  |
| T171 E    | Geologist                                |  |

This form is to be filed in compliance with MULE 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 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 multiply completed wells.