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| U.S.G.S.               |     |  |
| LAND OFFICE            |     |  |
| TRANSPORTER            | OIL |  |
|                        | GAS |  |
| OPERATOR               |     |  |
| PRORATION OFFICE       |     |  |

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-111  
Effective 1-1-65

I. Operator  
Manzano Oil Corporation 505/623-1996  
Address  
P.O. Box 571/Roswell, NM 88202  
Reason(s) for filing (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
Change name of well as per attached letter from Commissioner of Public Lands  
If change of ownership give name and address of previous owner (previous well name: Santa Fe Exploration State #1)

II. DESCRIPTION OF WELL AND LEASE

|  |               |  |  |                      |
|--|---------------|--|--|----------------------|
| Lease Name<br>Airstrip Northwest<br>Deep Unit  | Well No.<br>1 | Pool Name, Including Formation<br>Undes. Wildcat | Kind of Lease<br>Unitized<br>State, Federal or Fee State | Lease No.<br>LG-2869 |
| Location<br>Unit Letter B ; 660 Feet From The North Line and 1980 Feet From The East<br>Line of Section 20 Township 18-S Range 34-E , NMPM, Lea 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) |      |      |      |                            |      |
| 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   | Sec. | Twp. | Rge. | Is gas actually connected? | When |

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

|                                      |                             |                 |                   |          |              |        |           |             |              |
|--------------------------------------|-----------------------------|-----------------|-------------------|----------|--------------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X)   |                             | Oil Well        | Gas Well          | New Well | Workover     | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded                         | Date Compl. Ready to Prod.  | Total Depth     |                   |          | P.B.T.D.     |        |           |             |              |
| Elevations (DF, RKB, RT, GR, etc.)   | Name of Producing Formation | Top Oil/Gas Pay |                   |          | Tubing Depth |        |           |             |              |
| Perforations                         |                             |                 | Depth Casing Shoe |          |              |        |           |             |              |
| TUBING, CASING, AND CEMENTING RECORD |                             |                 |                   |          |              |        |           |             |              |
| HOLE SIZE                            | CASING & TUBING SIZE        |                 | DEPTH SET         |          | SACKS CEMENT |        |           |             |              |
|                                      |                             |                 |                   |          |              |        |           |             |              |
|                                      |                             |                 |                   |          |              |        |           |             |              |
|                                      |                             |                 |                   |          |              |        |           |             |              |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

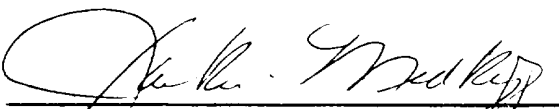
|                                 |                 |   |            |
|---------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tanks | Date of Test    | Producing Method (Flow, pump, gas lift, etc.) |            |
| Length of Test                  | Tubing Pressure | Casing Pressure                               | Choke Size |
| Actual Prod. During Test        | Oil-Bbls.       | Water-Bbls.                                   | Gas-MCF    |

GAS WELL

|                                  |                           |                           |                       |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D          | Length of Test            | Bbls. Condensate/MMCF     | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size            |

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

  
(Signature)  
Jackie Midkiff/Production Clerk  
10/4/85  
(Date)

OIL CONSERVATION COMMISSION  
OCT 7 - 1985  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Edna M. Scott  
TITLE Oil & Gas Inspector

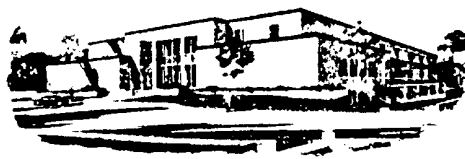
This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely 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.

RECEIVED  
OCT - 7 1985  
O.C.P.  
HQBBS OFFICE

# State of New Mexico



JIM BACA  
COMMISSIONER



## Commissioner of Public Lands

September 24, 1985

Padilla & Snyder  
P. O. Box 2523  
Santa Fe, New Mexico 87504

P.O. BOX 1148  
SANTA FE, NEW MEXICO 87504-1148  
Express Mail Delivery Used  
310 Old Santa Fe Trail  
Santa Fe, New Mexico 87501

Re: Airstrip Northwest Deep unit  
Lea County, New Mexico

ATTENTION: Mr. Ernest L. Padilla

Gentlemen:

The Commissioner of Public Lands has this date approved the Airstrip Northwest Deep Unit Agreement, Lea County, New Mexico which you have submitted on behalf of Manzano Oil Corporation as Unit Operator. Our approval is given with the understanding that you provide us with the New Mexico Oil Conservation Division Order for Case No. 8681 within thirty days from the date of this letter or our Certificates of Approval will be declared Null and Void. Upon subsequent favorable approval by the New Mexico Oil Conservation Division this agreement will be effective as of June 30, 1985.

Our records indicate that the Santa Fe Exploration Com Well No. 1 is being drilled in the NW/4NE/4 of Section 20-18S-34E. Please note that if this is to be considered as the initial test well on this unit, the name should be changed to the Airstrip Northwest Deep Unit Well No. 1. This name change may be done by submitting NMOCD Form C-104 to this office and the New Mexico Oil Conservation Division.

Enclosed are Five (5) Certificates of Approval.

Your filing fee in the amount of Thirty (\$30.00) Dollars has been received.

If we may be of further help please do not hesitate to call on us.

Very truly yours,

JIM BACA  
COMMISSIONER OF PUBLIC LANDS

BY: *Ray D. Graham*  
RAY D. GRAHAM, Director  
Oil and Gas Division  
AC 505/827-5744

JB/RDG/pm  
encls.  
cc:

OCD-Santa Fe, New Mexico