(41740							-	
DISTRIBUTE	DM			OILC	ONSER	RVA	TION	DIV	
SANTA PE			P. O. BOX 2088						
FILE			SANTA FE, NEW MEXICO						
v.s.a.s.				374.14					
LAND OFFICE									
TRANSPORTER	GAS	-			REQUEST	TFOR	ALLOW	ABLE	
OPERATOR	1					AN			
PROBATION OF	145	- -		AUTHORIZATI	ON TO TE	ANSP	ORT OIL	AND	
				AOTHORIZATA					
peretor			D 4	-1					
	Unio	on le	xas Petr	o i euiii					
Address	275	uc u	iahway 6	4, Farming	ton. NM	874	401		
	3/5	U3 n	Ignway 0	7, Turming				Othe	
teeson(s) for f	iling /C	heck pro	oper boz;						
New Well									
Men nem				Change in Trans	porter or.	\Box \sim		ם ו	
	ion			O11		≔	Gas	Po	
Recomplet		ship				≔	r Gas	Po	
==		ship		O11		≔		Po	
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Change in find address of the change of the	Ownersh previ	up give	ner	Oil Casinghead	Gas	Con	ndensate	Po	
Change of or and address of the DESCRIP Lease Name	Ownershi previ	ous own	ner	Casinghead EASE Weil No. Pool	Gas Name, Inclu	Cor	ndensate		
Change of or and address of the DESCRIP Lease Name	Ownershi previ	ous own	ner	Casinghead EASE Weil No. Pool	Gas	Cor	ndensate	Po p D	
Recomplete Change in Change of or address of the DESCRIP Lease Name	Ownersh previ	ous own	ELL AND L	Casinghead EASE Weil No. Pool 6 We	Gas Name, Inclu	Conduction Conduction	ormation Gall	D q	
Change of or and address of L. DESCRIP	ownershi previo	ous own	ELL AND L	Casinghead EASE Weil No. Pool 6 We	Gas Name, Inclu	Conduction Conduction	ormation Gall	D q	
Change of or and address of L. DESCRIP Lease Name	ownershi previo	ous own	ELL AND L	Casinghead EASE Weil No. Pool	Gas Name, Inclu	Conduction Conduction	ormation Gall	D q	
Change in Change of or ind address of the Community of th	Ownershif previo	OF WE	AND L	Casinghead EASE Weil No. Pool 6 We	Name, Inclusest Line	Conding Fo	ormation Gallu	D q	
Change of or and address of Lease Name Mc(Location	Ownershif previo	ous own	ELL AND L	Casinghead Casinghead EASE Weil No. Pool 6 We Feet From The	Name, Inclusest Line	Conduction Conduction	ormation Gall	D q	
Change in Change	Ownershif previous TION Crode	OF WE	ELL AND L	Casinghead EASE Well No. Pool 6 We Feet From The	Name, Incluses Line Sout	Conding Fo	ormation Gallu	D q	
Change in Change of or and address of the Control Change Name Unit Letter Line of Sec	Ownershif previous TION Crode	OF WE	ELL AND L	Casinghead EASE Well No. Pool 6 We Feet From The	Name, Incluses Line Sout	Conding Fo	ormation Gallu	93	
Recomplete Change in If change of or and address of II. DESCRIP Lease Name MC(Location Unit Letter Line of Sec III. DESIGN	Ownershif previous TON Crode	OF WE	352 Townsh	Casinghead EASE Weil No. Pool 6 We Feet From The 10 25N	Name, Inclusest Line Sout Ran AND NAT	Conding Fo	ormation Galli and GAS	93	
Change in Change	Ownershif previous TON Crode M M M M M M M M M M M M M	OF WE	352 Townsh TRANSPOR	Casinghead EASE Weil No. Pool 6 We Feet From The ar Condendansportation	Name, Incluses Line Sout Ran AND NATED TO	Conding Fordrith	GAS Address	93 76	
Change in Change	Ownershif previous TON Crode M M M M M M M M M M M M M	OF WE	352 Townsh TRANSPOR	Casinghead EASE Well No. Pool 6 We Feet From The	Name, Incluses Line Sout Ran AND NATED TO	Conding Fordrith	ormation Galli and GAS	93 (Cive	

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

N DIVISION

XICO 87501

PROBATION OFFICE AUT	HORIZATION TO TRANSPOR	RT OIL AND NATUR	AP BASCON N.	
·			- DIST OIV.	
Union Texas Petrole	ım		٠٠٠ ن	
Address				
375 US Highway 64,	Farmington, NM 8740			
Reason(s) for filing (Check proper box)		Other (Please	tom Out	e Cul-Dak
New Well Char	nge in Transporter of:	Pool cha	inge per NMOCD	85244
Mecompielion =	Oil Dry Go Casinghead Gas Conde	1	R.	85244
Change in Ownership	Cestridirect Ces			
if change of ownership give name				
and address of previous owner				
II. DESCRIPTION OF WELL AND LEASE	·		Kind of Lease	l Legge N
Lease Name			State, Federal or Fee Fed	SF-079609
McCroden A	6 West Lindrith G	Jailup Dakotaj	1 Çu	31. 01.
Location	et From The South Line of	939	For From The West	
Unit Letter M 352 Fee	it From TheOULUI _Line di	and		
O Zamahin	25N Range 3V	W , NMPM,	Rio Arriba	Cour
Line of Section 9 Township				
III. DESIGNATION OF TRANSPORTER	OF OIL AND NATURAL G	GAS	o which approved copy of this	form is to be sent)
Name of Authorized Transporter of Cit AA	or consenses.	P O Rox 142	9, Bloomfield, Nm	87413
Conoco, Inc. Surface Trans	ortation	denne (Cine address	o which approved copy of this	form is to be sent)
Name of Authorized Transporter of Casinghead (ide [_] K or Dry Cas [_]	375 US Highwa	y 64, Farmington,	NM 87401
Union Texas Petroleum	Sec. Twp. Rge.	is gas actually connect		
If well produces oil or liquids, give location of tanks.	9 25N 3W	Yes	The second section of the sect	
to the production is commingled with that for	om any other lease or pool, gi	ive commingling orde	unmper:	

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.

Robert C Trank
Permit Coordinator
(Tule)

(Date)

April 7, 1988

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deep weil, this form must be accompanied by a tabulation of the devi-tests taken on the well in accordance with RULE 111.

OIL CONSERVATION DIVISION

All sections of this form must be filled out completely for a sble on new and recompleted wells.

Fill out only Sections I. II. III., and VI for changes of owell name or number, or transporter, or other such change of condi Separate Forms C-104 must be filed for each pool in mul completed wells.

IV. COMPLETION DATA	·										
Designate Type of Completic	on - (X)	O11 Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest	v. Diff. Res		
Deta Spudded	Dete Comp.	i. Ready to I	Prod.	Total Dept	h		P.B.T.D.				
Elevetions (DF, RKB, RT, GR, etc.,	Name of Producing Cormation			Top Oil/Gas Pay			Tubing Depth				
Perforations	l			<u></u>			Depth Cast	ng Shoe			
		TUBING,	CASING, AN	D CEMENT	NG RECOR	0					
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			S	SACKS CEMENT			
	<u> </u>										
	!		·	 	<u>-</u>						
V. TEST DATA AND REQUEST	FOR ALLO	WABLE (Test must be a able for this d	ofter recovery epth or be for	of total value full 24 hours	ne of load oi	l and must be a	qual to or ex	ceed top allo		
Date First New Cil Run To Tanks	Date of Test			Producing Method (Flow, pump, gas lift, etc.)							
Longth of Tost	Tubing Pre	••••		Casing Pre	****		Choke Size				
Actual Prod. During Test	Q:1 - Bble.			Water - Bble) ,		Gas - MCF				
GAS WELL							<u> </u>		·		
Actual Prod. Test-MCF/D	Length of T	·est		Bble. Cond	enegte/MMCF		Gravity of C	Condensate			
Testing Method (pilot, back pr.)	Tubing Pre	owe (Shut	-ia)	Casing Pre	oowo (Shat-	in)	Choke Size				