

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator

Union Texas Petroleum Corporation

P. O. Box 1290, Farmington, New Mexico 87499

Person(s) for filing (Check proper box)

- ☐ New Well
☐ Recompletion
☐ Change in Ownership

Change in Transporter of:

- ☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☒ Condensate

Other (Please explain)

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, including Formation	Kind of Lease State, Federal or Fee	Federal Jic.Con.	Lease No.
Jicarilla "H"	10	Blanco Mesaverde			103

Location

Unit Letter D : 930 Feet From The North Line and 840 Feet From The West

Line of Section 17 Township 26N Range 4W , NMPM, Rio Arriba County

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Conoco, Inc. Surface Transportation	P. O. Box 1429, Bloomfield, N.M. 87413
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Gas Company of New Mexico	P. O. Box 26400, Albuquerque, N.M. 87125

Well produces oil or liquid, give location of tanks.	Unit	Sec.	Twp.	Range	Is gas actually connected?	When
	D	17	26N	4W	Yes	

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.

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.

Kenneth E. Roddy
Kenneth E. Roddy (Signature)
Area Production Superintendent

4/26/85

(Title)

(Date)

APR 26 1985

OIL CON. DIV.
DIST. 3

OIL CONSERVATION DIVISION

APPROVED APR 26 1985

BY

TITLE

SUPERVISOR DISTRICT # 3

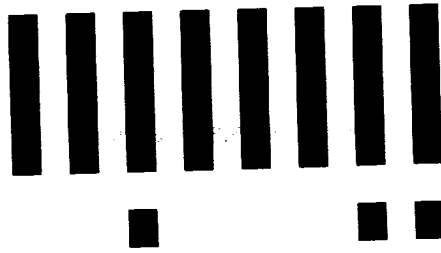
This form is to be filed in compliance with RULE 1104.

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.



LTR



Job separation sheet

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

OIL CONSERVATION DIVISION

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SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
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NO. OF COPIES DESIRED	
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FILE	
U.S.D.A.	
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/> OIL <input type="checkbox"/> GAS
OPERATOR	
PRODUCTION OFFICE	

I. Operator
Union Texas Petroleum Corporation

Address
P. O. Box 1290, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> Condensate

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla "H"	Well No. 10	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee	Federal Jic.Con.	Lease No. 103
Location Unit Letter <u>D</u> : <u>930</u> Feet From The <u>North</u> Line and <u>840</u> Feet From The <u>West</u> Line of Section <u>17</u> Township <u>26N</u> Range <u>4W</u> , NMPM, <u>Rio Arriba</u> County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Conoco, Inc. Surface Transportation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1429, Bloomfield, N.M. 87413
Name of Authorized Transporter of Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Gas Company of New Mexico	Address (Give address to which approved copy of this form is to be sent) P. O. Box 26400, Albuquerque, N.M. 87125
If well produces oil or liquids, give location of tanks.	Unit <u>D</u> Sec. <u>17</u> Twp. <u>26N</u> Rge. <u>4W</u> Is gas actually connected? <u>Yes</u> When

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.

I. CERTIFICATE OF COMPLIANCE

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.

Kenneth E. Roddy
Kenneth E. Roddy (Signature)
Area Production Superintendent
(Title)
4/26/85
(Date)

OIL CONSERVATION DIVISION

APPROVED Frank J. Davis APR 20 1985
BY
TITLE SUPERVISOR DISTRICT # 3

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