

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
MAIL	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
OPERATOR'S OFFICE	

**I. Operator**  
 Union Texas Petroleum Corporation  
 Address  
 P. O. Box 1290, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)  
 New Well  
 Recompletion  
 Change in Ownership

Change in Transporter of:  
 Oil  
 Condensate Gas  
 Dry Gas  
 Condensate

Other (Please explain)

If change of ownership give name and address of previous owner \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name Navajo Indian	Well No. 6	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Fed. 14-20	Lease No. 0-603-768
Location Unit Letter <u>E</u> ; <u>1700</u> Feet From The <u>North</u> Line and <u>910</u> Feet From The <u>West</u> Line of Section <u>6</u> Township <u>26N</u> Range <u>8W</u> , NMPM San Juan 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"/> Gary Energy Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 489, Bloomfield, N.M. 87413
Name of Authorized Transporter of Condensate Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, N.M. 87499
If well produces oil or liquids, give location of tanks. Unit: <u>E</u> Sec.: <u>6</u> Twp.: <u>26N</u> Rge.: <u>8W</u>	Is gas actually connected? <u>Yes</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.

**IV. 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  
 (Title)  
 10/2/84  
 (Date)

OIL CONSERVATION DIVISION  
 NOV 01 1984  
 APPROVED \_\_\_\_\_, IS \_\_\_\_\_  
 BY Frank J. Caves  
 SUPERVISOR DISTRICT # 3  
 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 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 technical condition.  
 Separate Forms C-104 must be filed for each well in multiply completed wells.

RECEIVED

OCT 10 1984  
 OIL CON. DIV.