DISTRIBUTION SANTA FE			
FILE			
U.S.G.S.  LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

- 1	DISTRIBUTION	NEW MEXICO OIL CO	DISERVATION COMMISSION	Form C-104
Į	SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-110
	FILE .		AND	Effective 1-1-65
ı	U.S.G.S.	ALITHODIZATION TO TOAL	NSPORT OIL AND NATURAL G	
	LAND OFFICE	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL G	PA3
1	OIL		· ·	
- 1	TRANSPORTER GAS			
			•	
	OPERATOR		-	
1.	PRORATION OFFICE			
1	Operator			
	Union Texas Petroleum	Corporation		
	Address			
		ngton, New Mexico 87499		
	Reason(s) for filing (Check proper box)		Other (Please explain)	
	New Well	Change in Transporter of:	Request temporar	y gas connection for
	Recompletion	Oil Dry Gas	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Change in Ownership	Casinghead Gas Condens		70din 11711
i				Coday film
	If change of ownership give name		•	
	and address of previous owner		· · · · · · · · · · · · · · · · · · ·	
H.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	ormation Kind of Lease	Lease No.
	Lease Name		C	
	Newsom "A"	20   Wildcat Gallu	p State, Federa	Fed. SF 078430
	Location			٠.
	Unit Letter J : 183	O Feet From The South Line	and 1760 . Feet From	rhe East
	Line of Section 4 Tow	mship 26N Range	8W , NMPM, San	Juan County
**	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s	
11.	Name of Authorized Transporter of Oil	Y or Condensate	Address (Give address to which appro-	ved copy of this form is to be sent)
			D O Pay 190 Bloomfi	67d N.M. 97/13
	Plateau, Inc.	inchead Gas (Y) c: Dry Gas	P. O. Box 489, Bloomfi Address (Give address to which appro-	ued copy of this form is to be sent)
	None of Authorized Transporter of Cas	The Com I	P. O. Box 990, Farming	+ N. M. 07400
	aso natural das	(01)		
	If we'll produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? Who	en .
	give location of tanks.	J 4 26N 8W	No	
	If this production is commingled wit	h that from any other lease or pool	give commingling order number:	
137	COMPLETION DATA	n that from any other rease or poor,		
١ ٧ .		Oil Well Gas Well	New Well Workover Deepen	Flug Back   Same Res'v. Diff Res'v.
	Designate Type of Completio	$x_n = (X)$ $XX$	XX	NAME OF THE PARTY
	Date Spunded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D
			, i	7297
	8/4/83	9/9/83 Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth
	Elevations (DF, RKB, RT, GE, etc.)	-	6222	6977
	6812' R.K.B.	Gallup	U C C C C C C C C C C C C C C C C C C C	Depth Casing Shoe
	Perforations		<b>-</b>	7334
	6222 - 7022	The second secon	The state of the s	/334
		TUBING, CASING, AND	CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	12-1/4"	8-5/8", 24.00#, K-55	328'	295 cu. ft.
	7-7/8"	5-1/2". 15.50#, K-55	7334	2744 cu. ft. (2 stages)
	7-170	8-5/8", 24.00#, K-55 5-1/2", 15.50#, K-55 2-3/8", 4.70#, J-55	6977'	
		1		
		<u> </u>		
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a)	fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allow-
	OIL WELL		Producing Method (Flower bumps as a	
	Date First New Cil Run To Tanks	Date of Test	Producing Method (Figure pump, co.)	
	·		171	
	Length of Test	Tubing Pressure	MAR!	2 8 1984
			BALL TANK	Con-MCD1
	Actual Prod. During Test	Off-BEis.	Water-Bbls.	N. DIV.
			OIL	
			DIST. 3	
	GAS WELL			
	Actual Frod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Actual Float February 2			
		Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	lesting Method (pitot, back pr.)	. uping Piessme ( Shut-In )	January 1	
	:		<u> </u>	
VI	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	ATION COMMISSION
• -			52-84 MAV	02 1984 . 19
	T because contifu that the rules and I	regulations of the Oil Conservation	APPROVED WIFE	<u>U 2. 130</u> , 19
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.  **Toplot E Poddy (Signature)**			ED SOM T CHANGE	
		BYOriginal Signed by FRANK T. CHAVEZ		
		TITLE SUPERV		
		11		
		This form is to be filed in	compliance with RULE 1104.	
		<b>/</b>	11	
	Longoth S. X	oddy		wable for a newly drilled or despense
	Ferneth E, X	oddy ature)	If this is a request for allo	anied by a tabulation of the deviction
	Kenneth E. Roddy	/	If this is a request for allo well, this form must be accomp	erdance with RULE 111.
	Area Production Superi	ntendent	If this is a request for allo well, this form must be accomptests taken on the well in sections of this form m	aried by a tabulation of the deviation o
	Area Production Superi	/	If this is a request for allo well, this form must be accomptests taken on the well in accomptests taken on the well in accompleted we allow and recompleted we	ust be filled out completely for allow-

(Date)

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.