

| | |
|---------------------|-----|
| NO. OF TONS DESIRED | |
| DISTRIBUTION | |
| SANTA FE | |
| FILE | |
| U.S.G.L. | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| OPERATOR | |
| PRODUCTION OFFICE | |

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

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Union Texas Petroleum Corporation
Address
4001 Bloomfield Hwy Box 11, Farmington, N.M. 87401

Reason(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
Nickson
Well No.
22
Pool Name, including Formation
Undesignated Gallup
Kind of Lease
Federal
State, Federal or Fee
SF
Lease No.
078430
Location
Unit Letter
H
1852 Feet From The North Line and 637 Feet From The East
Line of Section
14
Township
26N
Range
8W
NMPM, San Juan County

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐
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 Casinghead Gas ☒ or Dry Gas ☐
El Paso Natural Gas Company
Address (Give address to which approved copy of this form is to be sent)
P. O. Box 4990, Farmington, N.M. 87499
Well produces oil or liquids,
ive location of tanks.
Unit
H
Sec.
14
Twp.
26N
Rge.
8W
Is gas actually connected?
Yes
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.

CERTIFICATE OF COMPLIANCE

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
knowledge and belief.

Barbara Norman
Barbara Norman (Signature)
Production Technician
(Title)
7/17/85
(Date)

OIL CONSERVATION DIVISION

APPROVED

BY

TITLE

SUPERVISOR DISTRICT # 8

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 allow-
able 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.