

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

3173/M
3036/W2

Operator Union Texas Petroleum Corporation	
Address: P.O. Box 808, Farmington, New Mexico 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	This well began producing into UTP pipeline on 4/11/83 for tests.
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Angel Peak "B"	Well No. 34	Pool Name, including Formation Wildcat Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. SH047017-B
Location				
Unit Letter A	660	Feet From The North	Line and 660	Feet From The East
Line of Section 13	Township 28N	Range 11W	San Juan County	

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Plateau, Inc.	P.O. Box 489, Bloomfield, New Mexico 87413					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Union Texas Petroleum Corporation	P.O. Box 808, Farmington, New Mexico 87499					
If well produces oil or liquid, give location of tanks.	Unit A	Sec. 13	Twp. 28N	Rge. 11W	Is gas actually connected? Yes	When 4/10/83

If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
Date Spudded 11/22/82	Date Compl. Ready to Prod. 2/14/83		Total Depth 6030		P.B.T.D. 6007			
Elevations (DF, RKB, RT, etc.) 5786 R.K.B.	Name of Producing Formation Gallup		Top Oil/Gas Pay 5413		Tubing Depth 5846			
Perforations 5413 - 6004 (Total of 83 holes)					Depth Casing Shoe 6030			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
14-3/4"	10-3/4", 40.50#		323		360 cu. ft.			
9-7/8"	7-5/8", 26.40#		4798		1968 cu. ft. (2 stages)			
6-3/4"	5-1/2", 15.50#		4634 - 6030		194 cu. ft.			
	2-3/8" E.U.E., 4.70#		5846					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tank 4/12/83	Date of Test 4/14/83	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 235	Casing Pressure 472	Choke Size 1-1/4"
Actual Prod. During Test 86 bbls.	Oil-Bbls. 86	Water-Bbls. 8	Gas-MCF 397

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pit)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

Kenneth E. Roddy
Kenneth E. Roddy (Signature)
Area Production Superintendent (Title)
April 18, 1983 (Date)

DIST. 3

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY Original Signed by FRANK T. CHAVEZ
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.