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U.S.O.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION 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-100  
Effective 1-1-65

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FEB 16 1983

Operator: Union Texas Petroleum Corporation		OIL CON. DIV. DIST. 3
Address: P.O. Box 808, Farmington, New Mexico 87499		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <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"/>	We request approval of a temporary test allowable. We will produce the gas into our pipeline while testing.
Recompletion <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>		

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Zachry	Well No. 41	Pool Name, Including Formation Armenta Gallup Ext.	Kind of Lease State, Federal or Fee Federal	Lease No. SF080724-A
Location: Unit Letter 0 : 552 Feet From The South Line and 1945 Feet From The East Line of Section 12 Township 28N Range 10W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) 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"/> Union Texas Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 808, Farmington, New Mexico 87499					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 12	Twp. 28N	Range 10W	Is gas actually connected? Yes	When 2/14/83

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

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
XX				XX					
Date Spudded 11/30/82	Date Compl. Ready to Prod. 1/21/83	Total Depth 5991			F.B.T.D. 5950				
Elevation (D.E., R.K.B., E.T., G.H., etc.) 5506 R.K.B.	Name of Producing Formation Gallup	Top Oil/Gas Pay 5404			Tubing Depth 5838				
Perforations 5404 - 5948 (Total of 76 holes)						Depth Casing Shoe 5991			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
22"		16", 55.00#		160		413 cu. ft.			
14-3/4"		10-3/4", 40.50#		1379		2124 cu. ft.			
9-7/8"		7-5/8", 26.40#		5338		3330 cu. ft. (2 Stages)			
6-3/4"		5-1/2", 15.50#		5192 - 5991		195 cu. ft.			
		2-3/8", 4.70#		5838					

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)

Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

Actual Prod. Test-MCF/T	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	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  
February 17, 1983

OIL CONSERVATION COMMISSION

APPROVED  
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.