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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 1-1-85

30 35/1/2

I. Operator
Union Texas Petroleum Corporation

Address:
P.O. Box 808, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:		Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	This well began producing into UTP pipeline on 4/11/83 for tests.
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	
		Dry Gas	<input type="checkbox"/>	
		Condensate	<input type="checkbox"/>	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Angel Peak "B"	Well No. 24-E	Pool Name, Including Formation Wildcat Gallup	Kind of Lease State, Federal or Fee Federal SF	Lease No. 047017-B
Location: Unit Letter I , 1680 Feet From The South Line and 850 Feet From The East				
Line of Section 13 Township 28N Range 11W , 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 I 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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 12/19/82	Date Compl. Ready to Prod. 2/17/83	Total Depth 6576	P.B.T.D. 6518					
Elevations (DF, RKB, RT, GR, etc.) 5850 R.K.B.	Name of Producing Formation Gallup	Top Oil/Gas Pay 5431	Tubing Depth 5799					
Perforations 5431 - 6051 (89 holes)			Depth Casing Shoe 6569					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17"	13-3/8", 48.00#	280	360 cu. ft.
12-1/4"	9-5/8", 40.00#	5390	2831 cu. ft. (2 stages)
8-1/2"	7", 23.00#	5211 - 6569	225 cu. ft.
	2-3/8" E.U.E., 4.70#	5799	

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 Tanks 4/12/83	Date of Test 4/15/83	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 225	Casing Pressure 391	Choke Size 1-1/4"
Actual Prod. During Test 25 bbls.	Oil - Bbls. 25	Water - Bbls. 0	Gas - MCF 378

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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 (Title)
April 18, 1983 (Date)

OIL CONSERVATION COMMISSION
APR 21 1983

APPROVED _____, 19____
BY **Original Signed by FRANK T. CHAVEZ**
TITLE **SUPERVISOR DISTRICT # 9**

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.