## STATE OF NEW MEXICO NERGY WO MINERALS DEPARTMENT

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

Form C-104 Revised 10-01-78 Format 05-01-83 Page 1

## REQUEST FOR ALLOWABLE

HORATION OFFICE	AUTHORIZATION TO TRAI	AND KSPORT OIL AND NATI	JRAL GAS		
Union Toyas Batuslaum Coun					
Union Texas Petroleum Corp	poration	<del></del>			
P. O. Box 1290, Farmingtor	n, New Mexico 87499				
New Well	Change in Transporter of:	Other (Pleas	e expisus)	<del></del>	
Remapletion	on	Dry Gas			
_! Change in Ownership	Cosinghees Ces X	Condensate			
change of ownership give name 4 eddress of previous owner					
DESCRIPTION OF WELL AND LE	ASE				
Maddox Com	Name   Well No.   Pool Name, Including Formation		Kind of Lease	Lease Na.	
SCRITTER	1-A   Blanco Mesav	erde	State, Federal or Fee	Fee	
Unit Letter I : 2050	Feet From The South	790	Feet From The East		
Line of Section 17 Township	30N Rate	8W , NMPM	. San Juan	County	
. DESIGNATION OF TRANSPORTI	ER OF OIL AND NATURA	AL GAS	•		
come of Authorized Transporter of CII or Condensate 🔀 Accress (Give address to which approved copy of this form is to be sent)					
Conoco, Inc. Surface Transportation   P. O. Box 1429, Bloomfield, N.M. 87413					
El Paso Natural Gas Company P. O. Box 4990, Farmington, N.M. 87499					
well produces oil or liquide.  I 17 30N 8W Yes					
his production is commingied with that	from any other lease or pool	, give commingling order	number		
DTE: Complete Parts IV and V on re	everse side if necessary.				
CERTIFICATE OF COMPLIANCE DIL CONSERVATION DIVISION					
State certify that the rules and regulations of ti	har the rules and regulations of the Oil Conservation Division have				
a complied with and that the information given is true and complete to the best of					
TITLE DEPUTY GIL & UAS INSPECTION, UT			GIL & UAS INSTITUTION, UIST. #3		
do H		This form is to	be filed in compliance with MULE	1104	
Kenneth E. Roddy (Signature)  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					
Area Production Superintend	dent /	tests taken on the w	all to accordance with MAPE 111	•	
4/26/85		able on new and rec	-	-	
(Date)	10	well name or number,	ections I. II. III. and VI for chan or transporter, or other such change	of condition	
C/A	, 7PA 26. " & M	Separate Forms completed wells.	C-104 must be filed for each po	el in multiply	
•	SON 1985 W				
Ļ	OIST DIL				
	APA26 1985 DIST. 3 DIV.				