

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

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SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

**I. Operator**  
Union Texas Petroleum Corporation  
Address  
P. O. Box 1290, Farmington, New Mexico 87499

**Reason(s) for filing (Check proper box)**

<input type="checkbox"/> New Well	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> Condensate	Other (Please explain)
<input type="checkbox"/> Recompletion			
<input type="checkbox"/> Change in Ownership			

If change of ownership give name and address of previous owner \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name Saiz	Well No. 1-E	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter <u>I</u> : <u>1685</u> Feet From The <u>South</u> Line and <u>1065</u> Feet From The <u>East</u> Line of Section <u>20</u> Township <u>29N</u> Range <u>11W</u> , NMPM, <u>San Juan</u> County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Gary Energy Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 489, Bloomfield, N.M. 87413
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Southern Union Gathering Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 26400, Albuquerque, N.M. 87125
If well produces oil or liquids, give location of tanks. Unit : <u>I</u> Sec. : <u>20</u> Twp. : <u>29N</u> Rgs. : <u>11W</u>	Is gas actually connected? <u>Yes</u> When _____

If 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.

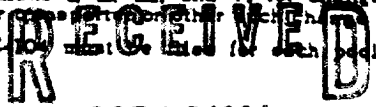
**VI. CERTIFICATE OF COMPLIANCE**

I hereby 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 my knowledge and belief.

Kenneth E. Roddy  
Kenneth E. Roddy (Signature)  
Area Production Superintendent  
(Title)  
10/3/84  
(Date)

OIL CONSERVATION DIVISION  
NOV 1 1984  
APPROVED \_\_\_\_\_  
BY Frank J. [Signature]  
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 transportation together with change of condition.  
Separate Forms C-104 must be filed for each well in multiply completed wells.



OCT 10 1984  
OIL CON. DIV.  
DIST. 3