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OPERATOR.			
PROBATION OFFICE			•

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.	SPORT OIL AND NATURAL GAS	
Operater		
Union Texas Petroleum Corporation		
Address		
P. O. Box 1290, Farmington, New Mexico 87499		
Roosen(s) for filing (Check proper box)	Other (Piesse exp	
New Well Change in Transporter of:	IN COLUMN	
Casinghood Gas X C	APR 2 6 120	
If change of ownership give name	011 6-	
and address of previous owner	OIL COM	
I. DESCRIPTION OF WELL AND LEASE	District Control of the Control of t	
Lease Name Well No. Pool Name, Including F	ormation Kind of Lease Federal Lease No.	
Albright 8-E Blanco Mesave		
Location	31 077003	
Unit Letter C : 790 Feet From The South	1615 Foot From The East	
	Post From The Load	
Line of Section 15 Township 29N Range	10W , NMPM, San Juan County	
_		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL		
Name of Authorized Transporter of CII or Condensate	Acaress (Give address to which approved copy of this form is to be sent)	
Conoco, Irc. Surface Transportation		
Name of Authorized Transporter of Casinghead Gas ar Dry Gas	.,,	
El Paso Natural Gas Company	P. O. Box 4990, Farmington, N.M. 87499	
If well produces oil or liquids, que location of tenss. L 15 29N 10W	Yes	
f 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.		
	1	
I. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED AND A STATE OF THE STA	
een complied with ant; that the information given is true and complete to the best of	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ny knowiedge and belief.	BY	
	TITLE BEST OF COLD AND THE TOTAL	
Monneth Z. Koddy	This form is to be filed in compliance with RULE 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 Superintendent	tests taken on the well in accordance with RULE 111,	
(Tule)	All sections of this form must be filled out completely for allow-	
4/26/85	able on new and recompleted wells.	
(Date)	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.	