STATE OF NEW MEXICO. INFRALS DEPARTMENT

ENERGY WIR WINNER	
OIST RIGUT 104	
SAMTA PE	
FILE	
V.8.6.5.	
LANG OFFICE	
TRAMPORTER OIL	
GAS	
OPERATOR	
PAGRATION OFFICE	
I.	

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

Form C-104 Revised 10-01-78

Separate Forms C-104 must be filed for each pool in malested wells.

REQUEST FOR ALLOWABLE AND

PRODUCTION OFFICE	AUTHORIZA	ATION TO TRAN	SPORT OF	L AND NATU	RAL GAS DIS	N. DIV	
Operator Union Texas Petroleum						• •	
	Corporaci	1011					
375 US Highway 64, Fai	rmington,	NM 87401			···		
Reason(s) for filing (Check proper box)				Other (Pleas	e espiein)		
New Well		ransporter of:		ł			
Recompletion	닏애	_ 🔼	Dry Ges	1			
Change in Ownership	Cesingh	eed Ges	Condensate	<u> </u>		 	
If change of ownership give name and address of previous owner							
II. DESCRIPTION OF WELL AND	LEASE				Kind of Lease		Lease
Lesse Name	Well No. Po	ool Name, Including			State. Federal or	Fee (_
Summit	6E	Aztec Fr	<u>uitland</u>	<u> </u>	31010, 7 000101 01		SF047019B
Location		ما به سال م		1520		Wost	
Unit Letter_F : 1840	Feet From 1	The North	_ine and	1320	Feet From The	M E3 C	
Line of Section 33 Towns	Aip 29N	Range	11W	, NMPN	А,	San Juan	Cou
Name of Authorized Transporter of Casing Sunterra Gas Gathering	phond Gos 🔲	or Dry Gas	1		10 which approved 09. Bloomfiled? , when		
	F :33	7wp. Ree.		streff course	ted? When		· ·
If this production is commingled with	that from any	other lesse or poc	d, give com	mingling orde	n numberi		
NOTE: Complete Parts IV and V							
VI. CERTIFICATE OF COMPLIANO	I			OIL	CONSERVATIO	N DIVISION 6 1987	
I hereby certify that the rules and regulations	of the Oil Cons	ervation Division ha	m APPI	10VED	JUN Z	ומהו ט	, 19
been complied with and that the information (piven is true and	complete to the best	of i	•	3.116		
my knowledge and belief.			8 Y—		0/-/_	9	
			TITL	«S	SUPERVISION	DISTRICT	#3
1112	1 1		,	Die form is t	e be flied in con	plicate with A	ULE 1104.
Robert CJ	rank		11 .			la far a aculu i	deillad as das
Permit Coordinator	•)		well,	this form mu	mo n eccamber io M pe eccamberio	eee with warre	on et the ter ! 111.
June 24, 1987			iii able i	se new end M	f this form must to recompleted wells Sections L. H. I	•	
(Pate)			well i	lows of sample	o, or transported	or other such c	hange of con-

Designate Type of Complete	tion - (X)	1 New Well Workever Deepen	Plue Beck Same Res'v. Diff. Res				
Deta Spudded	Date Compl. Reedy to Prod.	Total Dopth	P.B.T.D.				
Elevelione (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oll/Gen Pay	Tuhing Depth				
Periorations			Depth Casing Shoe				
	TUBING, CASING,	AND CEMENTING RECORD					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
V. TEST DATA AND REQUES OIL WELL Date First New Oil Rus To Tanke	T FOR ALLOWABLE (Test must be able for this	e after recovery of total volume of load a depth or be for full 24 hours) Producing Method (Flow, pump, ga	oll and muss be equal to or exceed top al is lift, etc.)				
Longth of Test	Tubing Pressure	Casing Pressure	Choke Size				
Actual Prod. During Tool	Oti - Bbis.	Weter - Bale.	Gas - MCP				
	Oti - 8 bis.	Weter - Bale.	Gas - MCP				
Actual Prod. During Tool GAS WELL Actual Prod. Tool-MCF/D	Oil - Shin.	Shis. Contensets/AACF	Gas - MCF Gravity of Condensate				

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STATE OF NEW MEXICO. ENERGY MID MINERALS DEPARTMENT

PO. 00 100110 0051	19700		
DISTRIBUTE		\perp	
BANTA PE			
FILE			
V.S.S.A.			
LAMO OFFICE			
TRANSPORTER	OIL		
12222	GAS		
OPERATOR			
PROBATION OF	168		_

OIL CONSERVATION DIVISION P. O. BOX 2088
SANTA FE, NEW MEXICO 8750

Form C-104 Revised 10-01-78 Format 06-01-63

Separate Forms C-106 must be filed for each pool in meleted wells.

TRAMSPORTER GAS	REQUEST FOI A AUTHORIZATION TO TRANS	R ALLOWABLE	On Co. 1987	
PRODATION OFFICE	AUTHORIZATION TO TRANS	PORT OIL AND NA	ATURAL GAS	
Operator				*
Union Texas Petrole	um Corporation	***		
375 US Highway 64,	Farmington, NM 87401			
Reason(s) for filing (Check proper bo		Other (P	lease explain)	
Non Ault	Change is Transporter of:	ry Ges		
Recompletion		Condensate		
Change in Ownership				
f change of ownership give name and address of previous owner		<u></u>		
I. DESCRIPTION OF WELL AL	Well No. Pool Name, Including F	Formation	Kind of Lease	Lease
Summit	6E Basin Dako	ta	State, Federal or Fee	<u>NM040982</u>
F :1840	Feet From The North Li	ine and1520	Feet From The West	
				Juanc
Line of Section 33 T	ownship 29N Range	11W .:	MPM, Jan	0 4 411
Conoco, Inc. Surface Name of Authorized Transporter of C	Trans. astrehead Gas or Dry Gas(XX)	P. O. Box	1429 Bloomfield Ness to which approved copy of the sess to which approved copy of 1809 Bloomfield.	M 87413 this form is to be sent,
Sunterra Gas Gatheri	Tunt Sec. Twp. Ree.	Is des estnessi co	nnected? When	
(I well produces ell er liquide, give location el tente.	F 14 31N 09W		t	
the state of consisted to	with that from any other lease or pool	, give commingling	order numbers	
NOTE: Complete Parts IV em	y de reverse line ij necessary.	1 6	IL CONSERVATION DIV	/ISION
VI. CERTIFICATE OF COMPL	ANCE		JUN 26 1987	
I hereby certify that the rules and regul	actions of the Oil Conservation Division have	APPROVED.	-	, 19
been complied with and that the inform my knowledge and belief.	stion given is true and complete to the best of	·	But Chang	
my knowledge hist besset.			SUPERVISION DISTRI	CT # 3
4		TITLE		
K.lo. + f	Trank		is to be flied in compliance a request for allowable for a	newly drilled or de-
	mature)			
Permit Coordinator	,	il tacco takan ai	the well in accordance with	M MAPE
June 24, 1987	Philej	il able on new t	my tocombiotog merre-	
UUHE 27, 130/		Fill out	miy Sections L. II. III. and	VI for changes of con
	A 1			

(Date)

Designate Type of Completie	os - (X)	Gas Well	New Well	Workever	Deepen	Plug Beck	Same Resty.	Dill. Res		
Date Spudded	Date Compi. Reedy to Prod.		Total Dopth Top Oll/Gae Pay			P.S.T.D.	P.S.T.D.			
Elevetions (DF, RKB, RT, GR, etc.,	Name of Producing Forms	Tubing Depth								
Perferences			Depth Casing Shoe							
	TUBING, C	ASING, AND	CEMENTIN	G RECOR)					
HOLE SIZE	CASING & TUBIN	G SIZE		DEPTH SE	T	SACKS CEMENT				
					······································					
	<u> </u>		<u> </u>					 		
V. TEST DATA AND REQUEST	FOR ALLOWABLE (T	eet must be a la for this de	fter recovery of pub or be for f	of total value full 24 hours,	e of load oil	and must be o	qual to or esc	ood top all		
Date First New Oil Run Te Tanks	Date of Test		Producing Method (Flow, pump, gas lift, etc.)				-			
Longth of Toot	Tubing Pressure		Casing Pressure			Choke Sise				
Actual Prod. During Test	Ott-Bbis.		Water - Shie.			Gas-MCP				
			<u> </u>							
GAS WELL										
Actual Pred. Teet-MCF/D	Langth of Test		Bhis. Conde	nacto/MACF	•	Gravity of	Condensate			
Teeting Method (puet, back pr.)	Tubing Presoure (Shut-1	-)	Casing Pres	eure (Ebab-	in)	Cheke Side				

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