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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

3076/N  
2-22-83

OIL CONSERVATION COMMISSION  
DISTRICT 10

Operator Union Texas Petroleum Corporation	
Address P.O. Box 808, Farmington, New Mexico 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Note: This well began its test on 2/3/83. The gas is being produced into U.T.P. pipeline.
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead 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 Zachry	Well No. 30	Pool Name, Including Formation Armenta Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. 080724-A
Location Unit Letter <u>A</u> ; <u>860</u> Feet From The <u>North</u> Line and <u>570</u> Feet From The <u>East</u> Line of Section <u>33</u> Township <u>29N</u> Range <u>10W</u> , NMPM, <u>San Juan</u> 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, N. M. 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, N. M. 87499	
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 33
	Twp. 29N	Rge. 10W
	Is gas actually connected? Yes	When 2/2/83

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. 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 11/28/82	Date Compl. Ready to Prod. 1/5/83		Total Depth 5960		P.B.T.D. 5912			
Elevations (DF, RKB, RT, GR, etc.) 5635 R.K.B.	Name of Producing Formation Gallup		Top Oil/Gas Pay 5409		Tubing Depth 5833			
Perforations 5409-5900 (78 holes)					Depth Casing Shoe 5958			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
14-3/4"	10-3/4", 40.50#		329		324 cu. ft.			
9-7/8"	7-5/8", 26.40#		5300		2547 cu. ft. (2 stages)			
6-3/4"	5-1/2", 15.50#		5154-5958		210 cu. ft.			
	2-3/8" E.U.E., 4.70#		5833					

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 2/7/83	Date of Test 2/8/83	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure 30	Casing Pressure 219	Choke Size 1-1/4"
Actual Prod. During Test 66 bbl.	Oil - Bbls. 66	Water - Bbls. 0	Gas - MCF 365

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

I. 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  
Area Production Superintendent  
(Signature)  
(Title)

February 9, 1983  
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 14 1983  
BY Original Signed by FRANK T. CHAVEZ  
TITLE SUPERVISOR DISTRICT 10

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.