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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

2,000 BBLs 3073 T
March 13, 1983
Form C-104
Supersedes Old C-104 and C-111
Effective 1-1-65

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I. OPERATOR		OIL CON. DIV. DIST. 3	
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 type="checkbox"/>	Change in Transporter of:	We request approval of a temporary test allowable. We will produce the gas into our pipeline while testing.	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>		
Change in Ownership <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. 29	Pool Name, Including Formation Armenta Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. SF080724-A
Location Unit Letter C ; 937 Feet From The North Line and 1785 Feet From The West Line of Section 33 Township 29N Range 10W, NMPM, San Juan 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, New Mexico 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, New Mexico 87499			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 33	Twp. 29N	Rge. 10W
	Is gas actually connected? Yes		When 2/14/83	

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 XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 12/3/82	Date Compl. Ready to Prod. 1/18/83		Total Depth 5998		P.B.T.D. 5957			
Elevations (DF, RKB, RT, GR, etc.) 5632 R.K.B.	Name of Producing Formation Gallup		Top Oil/Gas Pay 5398		Tubing Depth 5823			
Perforations 5398 - 5947 (Total of 84 holes)					Depth Casing Shoe 5998			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
14-3/4"	10-3/4", 40.50#		316		295 cu. ft.			
9-7/8"	7-5/8", 26.40#		5345		2393 cu. ft. (2 stages)			
6-3/4"	5-1/2", 15.50#		5158 - 5998		190 cu. ft.			
	2-3/8" E.U.E., 4.70#		5823					

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

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

VI. 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
Kenneth E. Roddy (Signature)
Area Production Superintendent
(Title)
February 17, 1983
(Date)

OIL CONSERVATION COMMISSION
FEB 18 1983
APPROVED
BY [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 transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.