

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

|                       |  |
|-----------------------|--|
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| SANTA FE              |  |
| FILE                  |  |
| U.S.G.A.              |  |
| LAND OFFICE           |  |
| TRANSPORTER           | <input type="checkbox"/> OIL<br><input type="checkbox"/> GAS |
| OPERATOR              |  |
| REGISTRATION OFFICE   |  |

Operator  
Union Texas Petroleum Corporation

Address  
P. O. Box 1290, Farmington, New Mexico 87499

|  |   |                        |  |
|--|---|------------------------|--|
| Consent(s) for filing (Check proper box)     |   | Other (Please explain) |  |
| <input type="checkbox"/> New Well            | Change in Transporter of:               |                        |  |
| <input type="checkbox"/> Recompletion        | <input checked="" type="checkbox"/> Oil |                        |  |
| <input type="checkbox"/> Change in Ownership | <input type="checkbox"/> Condensate     |                        |  |

Change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

|                 |          |  |                                  |           |
|-----------------|----------|--|----------------------------------|-----------|
| Well Name       | Well No. | Pool Name, including Formation                           | Kind of Lease                    | Lease No. |
| Summit          | 15       | Armenta Gallup   | State, Federal or Fee Federal SF | 047019-A  |
| Location        |          |  |                                  |           |
| Unit Letter     | C        | 330 Feet From The North Line and 2080 Feet From The West |                                  |           |
| Line of Section | 34       | Township 29N Range 11W                                   | NMPM, San Juan                   | County    |

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|   |  |
|---|--|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>        | Address (Give address to which approved copy of this form is to be sent) |
| Conoco, Inc. Surface Transportation   | P. O. Box 1429, Bloomfield, N.M. 87413                                   |
| Name of Authorized Transporter of Casinhead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| Union Texas Petroleum Corporation   | P.O. Box 1290, Farmington, N.M. 87499                                    |
| Well produces oil or liquids, give location of tanks.   | Unit Sec. Twp. Rge. Is gas actually connected? When                      |
|   | C 34 29N 11W Yes   |

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.

I. CERTIFICATE OF COMPLIANCE

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)  
4/26/85  
(Date)

OIL CONSERVATION DIVISION

APPROVED APR 26 1985, 19

BY

TITLE

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.