The second second			
HO. OF COPIES REC	EIVED	1	
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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
		T	

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 1-1-65
S
•
producing into UTP B/83 for testing.
Lease No.
Fee Fed. NM 020982
<u>East</u>
Juan County
copy of this form is to be sent) 1d. N.M. 87413 copy of this form is to be sent) ton. N.M. 87499
/17/83
Plug Back Same Resty. Diff. Resty.
P.B.T.D.
6085 Tubing Depth
5686 Depth Casing Shoe
6129
SACKS CEMENT
295 cu. ft. 3511 cu. ft. (3 stages)
nd must be equal to or exceed top allow-
etc.)
Choke Size
1-1/2" Gas-MCF
510
Gravity of Condensate
Choke Size

	LAND OFFICE					1013	1 1/2	,				
	OIL							12				
- 1	TRANSPORTER GAS											
ŀ	OPERATOR					2/ 20	•					
,	PRORATION OFFICE											
•	Operator											
	Union Texas Peti	role	eum Corporation									
	Address	_		N N								
	P. O. Box 1290,	Fai	Farmington, New Mexico 87499 Other (Please explain)									
	Reason(s) for filing (Check pi	roper	box,	Change in Transporter of: This well began producing into UTP								
	Recompletion			Oil Dry Gas		pipeline on						
	Change in Ownership											
l												
If change of ownership give name and address of previous owner												
	and address of province in											
11.	DESCRIPTION OF WEL	L A	ND 1	Well No. Pool Name, Including Fo	rmation	Kind of	Lease			Lease No.		
	Lease Name						ederal or F	ee Fad	. NM D	[
	Mangum Location			6 Undesignated G	<u>arrup</u>			1 60	<u>. III D</u>	20302		
	_		411	Feet From The South Line	_ , 16	550 5	From The	East		1		
	Unit Letter 0	: <u>'</u>	411	Feet From The South Line	ana	r eet :	riom ine_					
	Line of Section 28 Township 29 North Range 11 West , NMPM, San Juan Coun											
		_										
III.	DESIGNATION OF TRA	NSP	OR?	TER OF OIL AND NATURAL GAS	S	(Give address to which	anneoved c	one of this f	orm is to	he sent)		
	Name of Authorized Transpor			^		•						
	Plateau, Inc.	rter of	Cas	singhead Gas V or Dry Gas	P. U Address	Box 489, Blow Give address to which	approved c	opy of this f	orm is to	be sent)		
				^`		. Box 1290. Fa				i		
	Union Texas Pet		eun	Unit Sec. Twp. Ege.		tually connected?	When	113-9 - 13-911-				
	If well produces oil or liquida give location of tanks.	8,		0 28 29N 11W	Yes		11/1	7/83				
	If this production is commit	ngled		th that from any other lease or pool,	give com	mingling order number	r:					
	COMPLETION DATA							ug Back S	ame Besty	. Diff. Res'v.		
	Designate Type of C	omni	letic	Oil Well Gas Well	New Wel	Workover Deep	en1,	ig Buck , S.	21the 1165 .			
				Date Compl. Ready to Prod.	XX Total De	enth .	P.	B.T.D.				
	Date Spudded				613	-		5085				
	6/9/83 Elevations (DF, RKB, RT, G	P		6/24/83 Name of Producing Formation		Gas Pay		ibing Depth				
	5536 R.K.B.	71, 62	,	Gallup	525	9		5686				
	Perforations			<u> </u>				Depth Casing Shoe				
	5259 - 5895							5129				
				TUBING, CASING, AND	CEMEN							
	HOLE SIZE			CASING & TUBING SIZE		DEPTH SET		295 cu.	KS CEME	,NT		
	12-1/4"			8-5/8", 24.00#	310					3 stages)		
	7-7/8"			5-1/2", 15.50# 2-3/8", E.U.E., 4.70#	6129 5686			<u> </u>		J Student		
				2-3/8 , E.U.E., 4./0#	3000							
	TEST DATA AND REQ	TIES'	TE	OP ALLOWARIE (Test must be at	ter recov	ery of total volume of lo	ad oil and	must be equo	al to or ex	ceed top allow-		
٧.	OIL WELL	UES	LF	able for this de	pth or be	for full 24 hours)						
	Date First New Cil Run To	Tanks	•	Date of Test	_	ng Method (Flow, pump,	gas tijt, et					
	11/18/83			11/28/83		wing Pressure	TC	hoke Size				
	Length of Test			Tubing Pressure	, -		1 -	1-1/2"				
	24 hours			139	285 Water-E			as-MCF				
	Actual Prod. During Test			1 *** *	4			510				
	30 bbl. oil			30								
	GAS WELL											
	Actual Prod. Test-MCF/D			Length of Test	Bbls. C	ondensate/MMCF	G	ravity of Con	idensate			
					C	Pressure (Shut-in)		hoke Size				
	Testing Method (pitot, back	pr.)		Tubing Pressure (Shut-in)	Casing	Liassma (Dugg_rn)						
					 	OIL CONS	FRVATI	ON COM	AISSION			
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMM												
	the ship positive that the sules and regulations of the Oil Conservation							19				
		1		with and thei the illustration Elicon	BY_	Original Signed	by FRAN	K T. CHAVE	7			
	supervisor District #											
	TITLE SUPERVISOR DISTRICT											

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. Kenneth E. Roddy (Signature) Area Production Superintendent All sections of this form must be filled out completely for allowable on new and recompleted wells. (Title) 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. November 30, 1983 Separate Forms C-104 must be filed for each pool in multiply completed wells. (Date)

This form is to be filed in compliance with RULE 1104.