

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

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S.S.A.	
AREA OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
OPERATION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Company
Union Texas Petroleum Corporation

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

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

Change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE			
Well Name McCord	Well No. 6-E	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Free Fed. SF
Location Unit Letter <u>P</u> : <u>801</u> Feet From The <u>South</u> Line and <u>948</u> Feet From The <u>East</u>		Line of Section <u>9</u> Township <u>30N</u> Range <u>13W</u> , NMPM, San Juan County	

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
Gary Energy Corporation	P. O. Box 489, Bloomfield, N.M. 87413		
Name of Authorized Transporter of Confinement Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Company	P. O. Box 990, Farmington, N.M. 87499		
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 9	Trp. Rgs. 30N 13W
	Is gas actually connected?		When
	Yes		

If 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.

IV. CERTIFICATE OF COMPLIANCE
I 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)
10/2/84
(Date)

OIL CONSERVATION DIVISION NOV 1 1984
APPROVED _____ 19____
BY Frank J. Quigg
SUPERVISOR DISTRICT # 3
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, E, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z of owner, well name or number, or transportation of the well, including its condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.



OCT 10 1984
OIL CON. DIV.
DIST. 3