

NO. OF LINES DESIGNED	
DISTRIBUTION	
SANTA FE	
FILE	
MAJOR	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PRODUCTION OFFICE	

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

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Union Texas Petroleum Corporation
Address
P. O. Box 1290, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinthead Gas	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion		<input checked="" type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership		

Other (Please explain)

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Payne	Well No. 2	Pool Name, including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee	Federal SF	Lease No. 080517
Location Unit Letter <u>K</u> : <u>1810</u> Feet From The <u>South</u> Line and <u>1465</u> Feet From The <u>West</u> Line of Section <u>21</u> Township <u>32N</u> Range <u>10W</u> , NMPL, San Juan County					

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Conoco, Inc. Surface Transportation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1429, Bloomfield, N.M. 87413					
Name of Authorized Transporter of Casinthead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Southern Union Gathering Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 26400, Albuquerque, N.M. 87125					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 21	Twp. 32N	Range 10W	Is gas actually connected? Yes	When
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.

III. 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 Charles L. Smith
TITLE DEPUTY CHIEF OF DIVISION, DIST. #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 allow
able 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 multiple
completed wells.