

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
	GAS
OPERATOR	
PERMITS OFFICE	

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

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Union Texas Petroleum

Address 375 US Highway 64, Farmington, NM 87401

Reason(s) for filing (Check proper box):

☒ New Well ☐ Change in Transporter of:

☐ Recompletion ☐ Oil ☐ Dry Gas

☐ Change in Ownership ☐ Casingshead Gas ☐ Condensate

Other (Please explain):

If change of ownership give name and address of previous owner:

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Jicarilla H</u>	Well No. <u>14</u>	Pool Name, including Formation <u>W.H. Gallup</u>	Kind of Lease State, Federal or Fee <u>FED</u>	Lease <u>Jic. Con. 103</u>
Location Unit Letter <u>P</u> : <u>890</u> Feet From The <u>South</u> Line and <u>970</u> Feet From The <u>East</u>				
Line of Section <u>18</u> Township <u>26N</u> Range <u>4W</u> . NMPM, <u>Rio Arriba</u> Cor:				

III. 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)
<u>Giant Refining Company</u>	<u>P. O. Box 256, Farmington, NM 87499</u>
Name of Authorized Transporter of Casingshead 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)
<u>Gas Company of New Mexico</u>	<u>P. O. Box 1899, Bloomfield, NM 87413</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? when
Unit <u>P</u> Sec. <u>18</u> Twp. <u>26N</u> Rge. <u>4W</u>	<u>No</u>

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.

VI. 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.

Robert C. Frank
Robert C. Frank (Signature)
Permit Coordinator

(Title)

October 6, 1988

(Date)

OIL CONSERVATION DIVISION
OCT 17 1988

APPROVED _____, 19____
BY Samuel J. Chang
TITLE SUPERVISION 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 deep well, this form must be accompanied by a tabulation of the dev. tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for wells on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of a well name or number, or transporter, or other such change of conditions.
Separate Forms C-104 must be filed for each pool in newly recompleted wells.

IV. COMPLETION DATA

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Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Sect.	Same Res'v.	Diff. Res'v.
		X	X	X					
Date Spudded 6/15/88		Date Compl. Ready to Prod. 8/31/88			Total Depth 7725		P.S.T.D. 7665		
Elevations (DF, RKB, RT, CR, etc.) 6687 GL, 6699 KB		Name of Producing Formation Gallup			Top Oil/Gas Pay 7013		Tubing Depth 7506		
Perforations Gallup 7013-7114 gross							Depth Casing Shoe 7705 liner		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4	9-5/8	361	220 sx (260 cu. ft.)
8-3/4	7	3613	400 sx (979 cu. ft.)
6-1/4	4-1/2	3387-7705	540 sx (848 cu. ft.)

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 2673*	Length of Test 3 hrs	Bbls. Condensate/MMCF Tr	Gravity of Condensate N/A
Testing Method (pilot, back pr.) Back pressure	Tubing Pressure (Shut-In) 1050	Casing Pressure (Shut-In) 1029	Choke Size 3/4

*Commingled; production allocation to follow