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U.S.G.S.
LAND OFFICE
TRANSPORTER OIL GAS
OPERATOR
PRODUCTION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Superseding Old C-101 and
Effective 1-1-67

I. OPERATOR
Operator
UMC Petroleum Corporation
Address
1201 Louisiana, Suite 1400, Houston, Texas 77002
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of ☐ Other (Please explain)
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐
If change of ownership give name and address of previous owner
Ensource, Inc., 1201 Louisiana, Suite 1400, Houston, Texas 77002

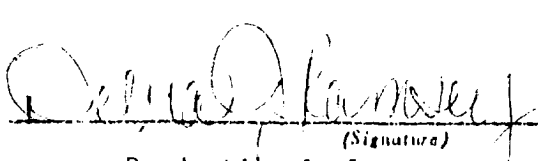
II. DESCRIPTION OF WELL AND LEASE
Lease Name
Federal 26
Well No.
2
Pool Name, including Formation
Shugart (Y-SR-Q-G)
Kind of Lease
State, Federal or Fee Federal
C-104 No. N
029392E
Location
Unit Letter
J
1880 Feet From The South Line and 1880 Feet From The East
Line of Section 26 Township 18S Range 31E NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Navajo Refining
Address (Give address to which approved copy of this form is to be sent)
Box 159, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
Conoco, Inc.
Address (Give address to which approved copy of this form is to be sent)
P. O. Box 1267, Ponca City, OK 74603
If well produces oil or liquids, give location of tanks.
Unit 0 Sec. 26 Twp. 18S Rge. 31E
Is gas actually connected? ☒ When 12-4-76

IV. COMPLETION DATA
Designate Type of Completion - (X)
Oil Well ☒ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Restv. ☐ Full. Res.
Date Spudded
Date Compl. Ready to Prod.
Total Depth
P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)
Name of Producing Formation
Top Oil/Gas Pay
Taking Depth
Perforations
Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE
CASING & TUBING SIZE
DEPTH SET
SACKS CEMENT
Past ID-3
10-12-90
chg ap

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL
(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
Length of Test
Bbls. Condensate/MCF
Gravity of Condensate
Testing Method (flow, back pr.)
Tubing Pressure (shut-in)
Casing Pressure (shut-in)
Choke Size

VI. CERTIFICATE OF COMPLIANCE
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Production Analyst
(Signature)
(Title)
6-11-90
OIL CONSERVATION COMMISSION
APPROVED OCT 8 1990
BY ORIGINAL SIGNED BY MIKE WILLIAMS
TITLE SUPERVISOR, DISTRICT II
This form is to be filed in compliance with RULE 1102.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable or new and re-completed wells.
Fill out only Sections I, II, III, and VI for changes of owner