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State of New Mexico
Energy, Minerals and Natural Resources Department

RECEIVED Form C-104
Revised 1-1-89
See Instructions
on bottom of Page

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

JAN 27 1992

O. C. D.
ARTIFICIAL LIFT

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

I. Operator Ultramar Oil and Gas Limited Well API No. N/A

Address 16825 Northchase Dr., Ste. 1200 - Houston, Texas 77060

Reason(s) for Filing (Check proper box) Other (Please explain)

New Well Change in Transporter of: Oil Dry Gas

Recompletion Casinghead Gas Condensate

Change in Operator

If change of operator give name and address of previous operator Ultramar Production Company - same address as above

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal "22" Com Well No. 1 Pool Name, Including Formation White City Penn (Morrow) Kind of Lease Surface/Production Fee Lease No. NM-457051

Location Unit Letter F : 1400 Feet From The North Line and 1650 Feet From The West Line

Section 22 Township 24-S Range 26-E NMPM Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) None

Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) Transwestern Pipeline Company P.O. Box 2521 - Houston, Texas 77001

If well produces oil or liquids, give location of tanks. Unit Sec. Temp. Rgn. Is gas actually condensed? When? Yes 1-20-76

If this production is commingled with that from any other lease or pool, give commingling order number.

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res v	Diff Res v
<input checked="" type="checkbox"/>								
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			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of lead oil and must be equal to or exceed test allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Test	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size <u>1-24-92</u>
Actual Prod. During Test	Oil - Bbl.	Water - Bbl.	Gas - MCF <u>6.4g OP</u>

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbl. Condensate/MCF	Gravity of Condensate
Tubing Method (plug, back pr.)	Tubing Pressure (Sust-in)	Casing Pressure (Sust-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been compared with and that the information given above is true and complete to the best of my knowledge and belief.

Tanya L. Cantrell
Signature
Tanya L. Cantrell - Regulatory Assistant
Printed Name Title
Date 1-1-92 Telephone No. 713/874-0700

OIL CONSERVATION DIVISION

Date Approved JAN 22 1992

By ORIGINAL SIGNED BY MIKE WILLIAMS
Title SUPERVISOR DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.