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Appropriate District Office
District I
P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

RECEIVED

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

OIL CONSERVATION DIVISION

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

JAN 17 1992

O. C. D.
ARTESIA OFFICE

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)	☐ New Well ☐ Recompleted ☒ Change in Operator ☐ Change in Transporter of Oil ☐ Change in Transporter of Gas ☐ Other (Please explain)		
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	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.				
Pennzoil Fed Com	1	White City Penn (Morrow)	Same (Federal) or Fee	NM-06787-I&E-103				
Location	Unit Letter	1980	Feet From The	South	1980	Feet From The	West	Line
Section	15	Township	24-S	Range	26-E	NMPL	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 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.	Trp.	Rgn.	Is gas actually connected?	When?
					Yes	12-22-76

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
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 test volume of liquid oil and must be equal to or exceed test allowable for this depth or be for full 24 hours.)

Date First New Oil Flow To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls	Water - Bbls

Choke Size 1-24-92
Gas - MCF 8 kg OP

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Shut-in Pressure/MOVC	Gravity of Condensate
Flowing Method (pump, swell, etc.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Signature Tanya L. Cantrell
Printed Name Tanya L. Cantrell - Regulatory Assistant
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.