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DISTRICT I
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State of New Mexico
Energy, Minerals and Natural Resources Department

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

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JAN 17 1992

O. C. D.
OFFICIAL OFFICE

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

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 ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐		
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 Forbearance	Kind of Lease	Lease No.					
C & K Federal	1	White City Penn (Morrow)	State, Federal or Fee	NM-15295					
Location	Unit Letter	1780	Feet From The	South	Line and	1780	Feet From The	East	Line
Section	8	Township	24-S	Range	26-E	NMTPM	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)				
El Paso Natural Gas Company		P.O. Box 1492 - El Paso, Texas 79999				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rgn.	Is gas actually connected?	When?
					Yes	9-7-78

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 either recovery of test volume of test 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
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
Flowing Method (pump, gas lift, etc.)	Tubing Pressure (Static-psi)	Casing Pressure (Static-psi)	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 correct to the best of my knowledge and belief.

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

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.

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