STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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|------------------|-------|--|----------|
| DISTRIBUTI | OM | | 1 |
| BANTA FE | | + | |
| FILE | | | |
| U.S.G.S. | | 1 | _ |
| LAND OFFICE | | 1 | \vdash |
| TRAMSPORTER | OIL | 1 | |
| THAMBPORTER | GAS | | |
| OPERATOR | | | |
| PROBATION OFFICE | | | |

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| I. | | | | |
|--|---|--|--|--|
| Operator | | | | |
| UNION OIL COMPANY OF CALIFORNIA | | | | |
| Address | | | | |
| P. O. BOX 2620 - CASPER, WYOMING 82602-2620 | | | | |
| Resson(s) for filing (Check proper box) Other (Pleas jexplain) New Well Change in Transporter of: | | | | |
| Recompletion Oil Dry Gas | | | | |
| | ondensate | | | |
| | | | | |
| If change of ownership give name EL PASO NATURAL GAS CO BOX 990 - FARMINGTON, NM 87401 | | | | |
| and address of previous owner. | | | | |
| II. DESCRIPTION OF WELL AND LEASE | | | | |
| Rincon Unit Well No. Pool Name, Including F | Ted. | | | |
| | State, Federal or Fee NM 013654 | | | |
| Location T 1650 Courth | 000 Fact | | | |
| Unit Letter $rac{1}{}$: $rac{1650}{}$ Feet From The $rac{	ext{South}}{}$ Lin | e and 990 Feet From The East | | | |
| Line of Section 17 Township 27N Range | 6W , NMPM, Rio Arriba County | | | |
| Citre of Section 17 (Sellent) 2/14 (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) | | | | |
| EL PASO NATURAL GAS CO. | BOX 990 - FARMINGTON, NM 87401 | | | |
| 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 CO. | BOX 990 - FARMINGTON, NM 87401 | | | |
| If well produces oil or liquids, Unit Sec. Twp. Rgs. | is gas actually connected? When | | | |
| give location of tanks. I 17 27N 6W | Yes | | | |
| f 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. | | | | |
| | OIL CONCERVATION DIVISION | | | |
| VI. CERTIFICATE OF COMPLIANCE | OIL CONSERVATION DIVISION | | | |
| I hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED APPROVED | | | | |
| been complied with and that the information given is true and complete to the best of | | | | |
| my knowledge and belief. | BYaug | | | |
| | TITLE SUPERVISOR DISTRICA 9 3 | | | |
| Copings of of the second | This form is to be filed in compliance with BULF 1104. | | | |
| | Into its a request for allowable for a newly drilled or deepends | | | |
| (Signature) DISTRICT PRODUCTION SUPERINTENDENT Well, this form must be accompanied by a tabulation of the content tests taken on the well in accordance with RULE !!!. | | | | |
| | All sections of this form must be filled out completely for allowable on new and recompleted wells. | | | |
| Fill out only Sections I. II. III. and VI for cha | | | | |
| well name or number, or transporter, or other such change of consequences. Separate Forms C-104 must be filled for each pool in many consequences. | | | | |
| APR 0 9 1986 Separate Forms C-104 must be filed for each pool in multi- | | | | |

OIL CON. DIV