

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

Form C-104  
Revised 10-01-78  
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SANTA FE	
FILE	
U.S.G.L.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
Union Texas Petroleum Corporation  
Address  
P. O. Box 1290, Farmington, New Mexico 87499  
Reason(s) for filing (Check proper box)  
☐ New Well ☐ Change in Transporter of: ☐ Oil ☐ Dry Gas  
☐ Recompletion ☐ Casinghead Gas ☒ Condensate  
☐ Change in Ownership ☐ Other (Please explain)  
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE  
Lease Name Jicarilla "N" Well No. 1 Pool Name, including Formation Basin Dakota  
Kind of Lease Federal Lease No. 418  
Location Unit Letter K Feet From The 1850 South Line and 1850 Feet From The West  
Line of Section 4 Township 24N Range 5W NMPM Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☐ or Condensate ☒  
Conoco, Inc. Surface Transportation Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 1429, Bloomfield, N.M. 87413  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒  
Gas Company of New Mexico Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 26400, Albuquerque, N.M. 87125  
If well produces oil or liquids, give location of tanks. Unit K Sec. 4 Twp. 24N Rgs. 5W Is gas actually connected? Yes When

If 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.

IV. 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 is true and complete to the best of my knowledge and belief.  
Signature Barbara Norman  
Title Production Technician  
Date 5/7/85

OIL CONSERVATION DIVISION  
APPROVED Signature Date MAY 10 1985  
BY Signature  
TITLE SUPERVISOR DISTRICT #3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
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 changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.