

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION 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 Texas Petroleum Corporation

Address  
P. O. Box 1290, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	Other (Please explain)
<input checked="" type="checkbox"/> Recompletion		
<input type="checkbox"/> Change in Ownership		

If change of ownership give name and address of previous owner \_\_\_\_\_

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DIST. 2

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla "J"	Well No. 12-E	Pool Name, including Formation Tapacito Gallup Ext.	Kind of Lease Federal Contract	Lease No. No. 153
Location Unit Letter <u>M</u> : <u>800</u> Feet From The <u>South</u> Line and <u>980</u> Feet From The <u>West</u> Line of Section <u>35</u> Township <u>26N</u> Range <u>5W</u> , NMPM, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Gary Energy Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 489, Bloomfield, N.M. 87413
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> 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 <u>M</u> Sec. <u>35</u> Twp. <u>26N</u> Rge. <u>5W</u>	Is gas actually connected? <u>Yes</u> When <u>1980</u>

If this production is commingled with that from any other lease or pool, give commingling order number: R-7507

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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.

Kenneth E. Roddy  
Kenneth E. Roddy (Signature)  
Area Production Superintendent  
(Title)

2/8/85  
(Date)

OIL CONSERVATION DIVISION  
FEB 13 1985  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by FRANK J. CHAVEZ  
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.

#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well XX	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'y.	Diff. Res'y. XX
Date Spudded 8/15/80	Date Compl. Ready to Prod. 12/28/84 1-5-85	Total Depth 7487		P.B.T.D. 7386					
Elevations (DF, RKB, RT, GR, etc.) 6665 R.K.B.	Name of Producing Formation Gallup	Top Oil/Gas Pay 6351		Tubing Depth 7263					
Perforations 6351 - 6718				Depth Casing Shoe 7487					
<b>TUBING, CASING, AND CEMENTING RECORD</b>									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12-1/4"	8-5/8", 24.00#		283		200 sacks				
7-7/8"	4-1/2", 10.50#		7487		1030 sacks (3 stages)				
	2-3/8", F.U.F., 4.70#		7263						

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 1-5-85	Date of Test 1/25/85	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 3 hours	Tubing Pressure 871	Casing Pressure 1121	Choke Size 3/4"
Actual Prod. During Test estimated 9 bbl. oil	Oil - Bbls. 9	Water - Bbls.	Gas - MCF 336

#### GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size