

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
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OPERATOR	
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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)

☐ New Well	Change in Transporter of: ☒ Oil ☐ Casinghead Gas	☐ Dry Gas ☐ Condensate	Other (Please explain) MAY 10 1985 OIL CONSERVATION DIVISION
☐ Recombination			
☐ Change in Ownership			

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla "J"	Well No. 12-E	Pool Name, including Formation Tapacito Gallup	Kind of Lease State, Federal or Fee	Federal Jic.Con.	Lease 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 ☒ 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 M	Sec. 35	Twp. 26N	Rge. 5W	Is gas actually connected? Yes	When
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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.

Barbara Norman
Barbara Norman (Signature)
Production Technician
(Title)

5/8/85
(Date)

OIL CONSERVATION DIVISION

APPROVED 5/10/85

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.

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☐ New Well	Change in Transporter of:	Other (Please explain)
☐ Recompletion	☐ Oil	☐ Dry Gas
☐ Change in Ownership	☐ Casinghead Gas	☒ Condensate

If change of ownership give name and address of previous owner

MAY 10 1985
OIL CON. DIV.
DIST. 3

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla "J"	Well No. 12-E	Pool Name, including Formation Blanco Mesaverde Basin Dakota	Kind of Lease State, Federal or Fee	Federal Jic. Con.	Lease No. 153
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If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>M</u> Sec. <u>35</u> Twp. <u>26N</u> Rge. <u>5W</u>	Yes

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Barbara Norman
Barbara Norman (Signature)
Production Technician
(Title)
5/8/85
(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 10 1985
BY Frank J. [Signature]
TITLE SUPERVISOR DISTRICT 3

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