NO. OF COPIES REC	EIVED	t	
DISTRIBUTION			
SANTA FE		1	
FILE			
U.\$.G.5.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
TRANSPORTERS		[

	DISTRIBUTION	NEW MEXICO OI	IL CONSERVATION COMMISSION	Form C-104
	SANTA FE		ST FOR ALLOWABLE	Supersedes Old C-104 and C-
			Effective 1-1-65	
	F168		AND	
	U.\$.G.5.	AUTHORIZATION TO	TRANSPORT OIL AND NATURAL	GAS .
	LAND OFFICE			
	TRANSPORTER GAS		•	,
	▎ ┈┻┈──┼			
	OPERATOR			
I.	PRORATION OFFICE			
	Operato:			
	UNION TEXAS PETROL	EUM CORP		
	1	rmington, New Mexico 8	7499	DFCIO
	P. U. BOX 606 , Fa	Thursday, New Textee 0	Other (Please explain)	1982
	Reason(s) for filing (Check proper b		Other (Flease explain)	OIL CON. COM
	New Well	Change in Transporter of:		Dion CON
	Recompletion	Cil Dr	y Gas	PIST. 3
	Change in Ownership	Casinghead Gas Co	ondensate	
	If change of ownership give name and address of previous owner			
	DESCRIPTION OF WELL AN	D LEASE		
	Lease Name	Well No. Pool Name, Includir	ng Formation Kind of Lea	Federal Lease No.
	i ==	7 Blanco Mesa	verde State Fede	ral or Fecontr. No. 107
	Jicarilla "F"	/ Branco riesa	verde	CONTINU. 107
	Location			
	Unit Letter K ;	1850 Feet From The South	Line and 1520 Feet From	The West
	Unit Letter	1000		
		Township 26N Rarge	4W , NMPM, Rio A	rriha County
	Line of Section 28	Township 26N Rarge	444 , , , , , , , , , , , , , , , , , ,	
III.	DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL	GAS	oved copy of this form is to be sent)
	Name of Authorized Transporter of	Oil 🔲 or Condensate 🔀	Address (Give address to which appr	oyea copy of this form is to be sent)
	Distant Tng		P. O. Box 108, Farmi	ngton. New Mexico
	Plateau. Inc.	Casinghead Gas or Dry Gas S	Address (Give address to which appr	oved copy of this form is to be sent)
			First International B	building - Dallas, Texas
	Gas Company of New	Mexico	Attention: Mr. R. J. !s gas actually connected?	McCrary
	If well produces oil or liquids,	Unit Sec. Twp. Fige.	Is gas actually connected? W	hen
	give location of tanks.	77 1 20 267	W No	
	<u></u>	K 28 26N - 4		
		with that from any other lease or po	ool, give commingling order number:	
IV.	COMPLETION DATA	Long West Long West	II New Well Workover Deepen	Plug Back Same Resty. Diff. Resty
	D : . T (C)	Oil Well Gas Wel	1 1	1
	Designate Type of Comple	$X \rightarrow X$	X	1 1
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	•	1 0 -11-82	8358	8329
	8-14-82		Top Oil/Gas Pay	Tubing Depth
	Elevations (DF, RKB, RT, GR, etc.			The state of the s
	7262 R.K.B.	Mesaverde	5522	6081
	Perforations			Depth Casing Shoe
	5522 - 6075 (20 ho	olec)		8333
	5522 - 6075 (20 110	TURING CASING	AND CEMENTING RECORD	
				SACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	
	14"	10-3/4", 40.50#	360	207 cu. ft.
	9 - 7/8"	7-5/8", 26.40#	6512	1619 cu. ft. (2 stage
	6-3/4"	5-1/2", 15.50#	6288 - 8333	320 cu. ft.
	0-3/4	2-3/8" E.U.E.,		
i				
v	TEST DATA AND REQUEST	FOR ALLOWABLE (Test must)	be after recovery of total volume of load of	l and must be equal to or exceed top allow
• •	OIL WELL	able for thi	s depth or be for full 24 hours;	
i	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
,			•	
١		Tubing Pressure	Casing Pressure	Choke Size
1	Length of Text	I aping bieseme	Cashing (1995 at)	
1				10
1	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas-MCF
-		!		
1				
	GAS WELL			Complete of Comple
١	Actual Frod. Test-MCF/I	Length of Test	Bbls. Condensate/MMC1	Gravity of Condensate
ļ	1587	3 Hours		
Ì	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Fressure (Shut-in)	Choke Size
	•	1170	1190	3/4"
	Back Pressure	11/0		
v	CERTIFICATE OF COMPLIA	NCE	OIL CONSERV	ATION COMMISSION
¥ 1.	CLAIRICALE OF COMELIA		12-17-82	
			APPROVED	

VI.

December 9, 1982

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above in true and complete to the best of my knowledge and belief.

Kount 5. Kekled	
KENNETH E. RODDY(Stending) Area Production Superindent	_
(Tule)	

(Date)

Original Signed by CHARLES CHELSON 4.15. æ 90 TITLE STORY

This form is to be filed in compliance with RULE 1104.

If this is a request for silowable for a newly drilled or deepenewell, this form must be accompanied by a tabulation of the deviatio tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allow able 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 multiple completed wells.