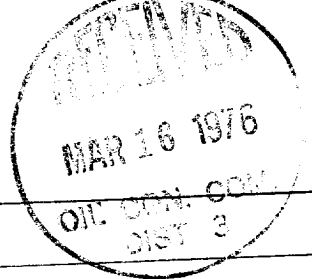


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NO.	
IND. OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	3
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65



Operator
Universal Resources Corporation

Address
910 Nat'l Foundation W. Bldg., 3555 NW 58, Okla. City, Okla. 73112

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☒
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name and address of previous owner **None**

II. DESCRIPTION OF WELL AND LEASE

Lease Name Grigsby-Federal	Well No. 2	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. NM-8007
Location Unit Letter 2N	1000	Feet From The South Line and 1640	Feet From The West	
Line of Section 7	Township 25N	Range 10W	NMPM, San Juan	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)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
NW Pipeline	P.O. Box 1526, Salt Lake City, Utah, 84110
If well produces oil or liquids, give location of tanks.	Is gas actually connected? No When Upon Approval

If this production is commingled with that from any other lease or pool, give commingling order number: **No**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded 6-13-74	Date Compl. Ready to Prod. 7-23-74	Total Depth 6228'	P.B.T.D. 6190'					
Elevations (DF, RKB, RT, GR, etc.) GR 6391'	Name of Producing Formation Dakota	Top Oil/Gas Pay 6009'	Tubing Depth 6031' PKB					
Perforations 6009-12, 6038-, 6050-60.			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD			SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	
12-1/4"	8-7/8"	232' RKB	175
7-7/8"	4-1/2"	6228' RKB	1606 Cu. Ft.

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D AOE 2105	Length of Test 24 Hr.	Bbls. Condensate/MMCF None	Gravity of Condensate None
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in) 1770#	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

(Signature)

Vice President

(Title)

March 12, 1976

(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAR 16 1976**, 19

BY **ORIGINAL SIGNED BY N. E. MAXWELL, JR.**

TITLE **PETROLEUM ENGINEER**

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 all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.