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U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			

Area Production Superintendent

February 14, 1983

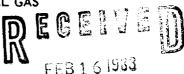
(Title)

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE 3-8-83 AND

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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS



	LAND OFFICE	A THORIZATION TO TR	ANSI ORT OF AND NATURAL			
	TRANSPORTER OIL	-		DECENS		
	OPERATOR GAS	4		N		
	PROPATION OFFICE	4	•	FEB 1 6 1983		
	Operator		· · · · · · · · · · · · · · · · · · ·	OIL CON DIV		
	Union Texas Petroleum Corporation			OIL CON. DIV.		
	Address			DIST. 3		
		gton, New Mexico 87499				
	Reason(s) for filing (Check proper box		Other (Please explain)			
	New Well	Change in Transporter of:	1 1	al of a temporary test		
	Recompletion Change in Ownership	Cil Dry Go Casinghead Gas Conde	1 1 1	will produce the gas into		
	Clunde in Ownership	Cusinghead Gus Conde	nsate our pipeline w	nile testing.		
	If change of ownership give name					
	and address of previous owner					
II.	DESCRIPTION OF WELL AND	LEASE				
	Lease Name	Well No. Pool Name, Including F		20000		
	Zachry	40 Armenta Gall	up Ext. State, Fed.	eral or Fee Federal SF 080724-A		
	Location	-0 - 1	700	_		
	Unit Letter ; 16:	50 Feet From The South Li	ne and 720 Feet Fro	m The East		
	Line of Section 10 To	wnship 28N Range	10W , NMPM, Sa	n Ivon		
	Line of Section IU To	wnship 28N Range	10W , NMPM, Sa	n Juan County		
ш	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS			
	Name of Authorized Transporter of Oil			proved copy of this form is to be sent)		
	Plateau, Inc.		P.O. Box 489, Bloomfi	eld, New Mexico 87413 proved copy of this form is to be sent)		
	Name of Authorized Transporter of Car	singhead Gas X or Dry Gas	Address (Give address to which app	proved copy of this form is to be sent)		
	Union Texas Petroleur			ton, New Mexico 87499		
	If well produces oil or liquids,	Unit Sec. Twp. Ege.		When		
	give location of tanks.	I 10 28N 10W	Yes	2/12/83		
		th that from any other lease or pool,	give commingling order number:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
	Designate Type of Completic	on - (X)	XX			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	11/22/82	12/4/82	6055	6009		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	5749 R.K.B.	Gallup	5464	5878		
	Perforations			Depth Casing Shoe		
	5464 - 6006 (67 holes) 6054					
		T	D CEMENTING RECORD	SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE 10-3/4", 40.50#	317	325 cu. ft.		
	9-7/8"	7-5/8", 26.40#	5386	3453 cu. ft. (2 Stages)		
	6-3/4"	5-1/2", 15.50#	5202-6054	178 cu. ft.		
		2-3/8" E.U.E., 4.70#	5878			
v.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	after recovery of total volume of load o	il and must be equal to or exceed top allow		
• •	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	tijt, etc.)		
		Tobbe Books	Casing Pressure	Choke Size		
	Length of Test	Tubing Pressure	Custing Pressure			
	Actual Pred. During Test	Cil-Bbls.	Water - Bbls.	Gas-MCF		
	7,000					
		<u> </u>	<u> </u>			
	GAS WELL					
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSER	ATION COMMISSION		
			APPROVED	FEB 1,6 1983		
	I hereby certify that the rules and r Commission have been complied w	vith and that the information given		, , ,		
	above is true and complete to the	best of my knowledge and belief.	BY July			
			TITLE SUPERVISOR DISTRICT # 3			
	1/ ////		This form is to be filed in compliance with RULE 1104.			
	Konnoth & 1	a West				
	Kenneth F Roddy (Signature)		If this is a request for all well, this form must be accom	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.