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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			

September 28, 1983

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTAFE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65			
	FILE U.S.G.S.	-	AND				
	LAND OFFICE	- AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	3055/N: 83			
	OIL	-		15 N 83			
	TRANSPORTER GAS			20 ⁵ (4)			
	} -			2			
_	PRORATION OFFICE	-		1 '			
I.	Operator						
	Union Texas Petroleu	um Corporation	<u> </u>	FREIVEN			
		mington Now Movies 9740	io IK				
	Reason(s) for filing (Check proper box	mington, New Mexico 8749					
			This woll began	SEP 3 0 1983 producing into UTPC			
	New Well	Change in Transporter of: Oil Dry Go					
	Recompletion			N83CON KeDING.			
	Change in Ownership	Casinghead Gas Conde	nsate	DIST. 3			
	If change of ownership give name						
	and address of previous owner						
	T DESCRIPTION OF HERY AND I DAGE						
11.	I. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No.						
	Angel Peak "B" 35 Undesignated Gallup State, Federal or Fee Fed. SF 047017-B						
	Location	55 Olides I glid bed	<u>uaiia</u>	100.01 917027 5			
	Δ 50	OO North	500	- The Fast			
	Unit Letter A ; 500 Feet From The North Line and 500 Feet From The East						
	Line of Section 25 Township 28N Range 11W , NMPM, San Juan County						
	Line of Section 25 Township 28N Range 11W , NMPM, San Juan County						
***	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	16				
III.	Name of Authorized Transporter of Oi	1 V or Condensate	Address (Give address to which app	roved copy of this form is to be sent)			
		* —	P O Roy 189 Bloomf	Field N.M. 87413			
	Plateau, Inc. Name of Authorized Transporter of Ca	rsinghead Gas V or Dry Gas	Address (Give address to which app	roved copy of this form is to be sent)			
			P. O. Box 1290, Farmi				
	Union Texas Petrole	Unit Sec. Twp. P.ge.		When			
	If well produces oil or liquids, give location of tanks.	A 25 28N 11W	Yes	9/6/83			
	<u></u>						
		ith that from any other lease or pool,	give commingling order number:				
17.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.			
	Designate Type of Completi	on $-(X)$ XX	XX	1 1			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	7/23/83	8/15/83	6321	6271			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	5897 R.K.B.	_	5410	5879			
	Perforations	j darrup	1 3410	Depth Casing Shoe			
				6313			
	5410 - 6240 TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	13-1/2"	9-5/8", 36.00#, K-55	300	330 cu. ft.			
	8-3/4"	7", 23,00#, K-55	5283	2604 cu. ft. (2 stages)			
	6-1/4"	4-1/2", 10.50#, K-55	5086 - 6313	243 cu. ft.			
		2-3/8", E.U.E., 4.70#					
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 allow							
٧.	OIL WELL	able for this de	epin or se jor juil 24 nours)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)			
	9/8/83	9/22/83	Flowing				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	24 hours	130	236	1-1/4"			
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF			
	7 ⁻ bb1.	7	1	156			
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate			
	·						
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
VI.	CERTIFICATE OF COMPLIAN	ICE		OIL CONSERVATION COMMISSION			
VI. CERTIFICATE OF COMPENSATION				APPROVEDSFP19			
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED, 19					
		BY Original Signed by FRANK T. CHAVEZ					
	above is true and complete to the best of my knowledge and belief.		BA THE THE PARTY OF THE PARTY O				
	, /		TITLE SUPERVISOR CAST CAST S				
Kenneth E. Roddy			This form is to be filed in compliance with RULE 1104.				
			really is a request for allowable for a newly drilled or deepened				
		nature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.				
	•		tests taken on the well in ac-	cordance with RULE 111.			
Area Production Superintendent (Title)			All sections of this form able on new and recompleted	must be filled out completely for allow- wells.			

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I. H. 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.