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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

I.

Operator Union Texas Petroleum, A Division of Allied Chemical Corporation		
Address Suite 1122, 1860 Lincoln Street, Denver, Colorado 80295		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Prichard-Federal	Well No. Pool Name, including Formation 1 A Blanco Mesaverde	Kind of Lease State, Federal or Fee Federal
Location Unit Letter 0 ; 830 Feet From The South Line and 1850 Feet From The East Line of Section 6 , Township 29 North Range 8 West , NMPM, San Juan County		

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) 1921 Bloomfield Blvd., Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 6
	Twp. 29N	Rge. 8W
	Is gas actually connected? No	When

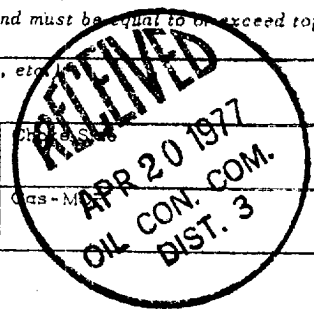
If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 3/3/77	Date Compl. Ready to Prod. 4/14/77		Total Depth 5600			P.B.T.D. 5569		
Pool Blanco Mesaverde	Name of Producing Formation Mesaverde		Top Oil/Gas Pay 4647			Tubing Depth 5529		
Perforations 4647-5521						Depth Casing Shoe 5600		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13-3/4"	9-5/8"		298		275			
8-3/4"	7"		3310		600			
6-1/4"	4-1/2"		3094-5600		275			
	2-3/8"		5529					

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	Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-Mcf



GAS WELL

Actual Prod. Test-MCF/D 3481	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Choke nipple	Tubing Pressure 273	Casing Pressure 583	Choke Size 3/4"

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)

Assistant District Production Manager

(Title)

April 18, 1977

OIL CONSERVATION COMMISSION

APPROVED APR 20 1977, 19

BY Original Signed by A. R. Kendrick

TITLE SUPERVISOR DIST. 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 Sections I, II, III, and VI only for changes of owner,