

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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| OPERATOR | |
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Union Texas Petroleum Corporation

Address
4001 Bloomfield Highway, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)

| | | |
|--|---|-------------------------------------|
| <input checked="" type="checkbox"/> New Well | Change in Transporter of: | Other (Please explain) |
| <input type="checkbox"/> 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 |

Change of ownership give name and address of previous owner _____

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DIST. 3

DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|------------------|--|--|------------------------|
| Lease Name McCord | Well No. 13 E | Pool Name, including Formation Basin Dakota | Kind of Lease State, Federal or Fee Federal | Lease No. SF 078212 |
| Location Unit Letter <u>I</u> : <u>1850</u> Feet From The <u>South</u> Line and <u>790</u> Feet From The <u>East</u> Line of Section <u>22</u> Township <u>30N</u> Range <u>13W</u> , NMPM, <u>San Juan</u> County | | | | |

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | |
|---|---|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Gary Energy Corp | Address (Give address to which approved copy of this form is to be sent) P. O. Box 489, Bloomfield, New Mexico 87413 |
| 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 87499 |
| Well produces oil or liquids, give location of tanks. Unit <u>I</u> Sec. <u>22</u> Twp. <u>30N</u> Rge. <u>13</u> | Is gas actually connected? <u>No</u> When _____ |

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

NOTE: Complete Parts IV and V on reverse side if necessary.

CERTIFICATE OF COMPLIANCE

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

Robert C. Frank
(Signature)
Regulatory and Environmental Analyst
(Title)
December 14, 1984
(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 20 1984, 19 _____

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 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 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.

IV. COMPLETION DATA

| | | | | | | | | | |
|---|---|-----------------------------|----------|----------|----------|---------------------------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Resrv. | Diff. Resrv. |
| | | | X | X | | | | | |
| Date Spudded 09/14/84 | Date Compl. Ready to Prod. 09/22/84 11-5-84 | Total Depth 6460' KB | | | | P.B.T.D. 6414' KB | | | |
| Elevations (DF, RKB, RT, CR, etc.) 5614 GR, 5621 | Name of Producing Formation Dakota | Top Oil/Gas Pay 6186' KB | | | | Tubing Depth 6329' KB | | | |
| Perforations 20 - 0.32" Shots : 6360, 56, 54, 14, 04, 04, 6299, 94, 89 84, 79, 75, 70, 62, 58, 52, 48, 6197, 90, 86 | | | | | | Depth Casing Shoe 6451 | | | |

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|-----------|----------------------|-----------|------------------------|
| 12-1/4" | 8-5/8" 24# | 240' KB | 250 SACS - 259 CU FT |
| 7-7/8" | 4-1/2" 10.5# | 6459' KB | 1520 SACS - 2381 CU FT |
| | 2 3/8" | 6329' KB | |

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 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 2910/24 Hours 2910 | Length of Test 3 Hours | Bbls. Condensate/MCF 0 | Gravity of Condensate N/A |
| Testing Method (plug, back pr.) Back Pressure | Tubing Pressure (Shut-In) 1814 psig | Casing Pressure (Shut-In) 1800 psig | Choke Size 3/4" |