

NO. OF LINES DESIGNED	
DISTRIBUTION	
ANTA FE	
ILE	
AGG.	
AND OFFICE	
TRANSPORTER	OIL
	GAS
PERATOR	
ORATION OFFICE	

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

Form C-104
Revised 10-01-78
Format 06-01-83
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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Owner Union Texas Petroleum Corporation	
Address P. O. Box 1290, Farmington, New Mexico 87499	
Person(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well	RECEIVED OCT 10 1984 OIL CON. DIV. DIST. 3
<input type="checkbox"/> Recompletion	
<input type="checkbox"/> Change in Ownership	
Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input checked="" type="checkbox"/> Condensate	

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name Nye Federal	Well No. 1	Pool Name, including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee Fed. SF	Lease No. 078244
Location Unit Letter <u>M</u> : <u>1085</u> Feet From The <u>South</u> Line and <u>4373</u> Feet From The <u>East</u>				
Line of Section <u>20</u> Township <u>31N</u> Range <u>12W</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"/>	Address (Give address to which approved copy of this form is to be sent)
Gary Energy Corporation	P. O. Box 489, Bloomfield, N.M. 87413
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Southern Union Gathering Company	P. O. Box 26400, Albuquerque, N.M. 87125
Well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
<u>M</u> <u>20</u> <u>31N</u> <u>12W</u>	Yes

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.

Kenneth E. Roddy
Kenneth E. Roddy (Signature)
Area Production Superintendent
(Title)
10/3/84
(Date)

OIL CONSERVATION DIVISION

APPROVED 3 NOV 01 1984
BY James J. [Signature]
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 allow-
able 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.