STATE OF NEW MEXICO. ENERGY MO MINERALS DEPARTMENT

DISTRIBUTION	OIL CONSERVA	ION
SANTA FE	P. O. 80 X	2088
PILE	SANTA FE, NEW	
V.4.0.4.	SANTATO	
LANG OFFICE		
TRANSPORTER	REQUEST FOR	ALLOW
OPERATOR	AN	D
PROBATION OFFICE	AUTHORIZATION TO TRANSPO	ORT OIL
-		<u>. </u>
Coordier		
Union Texas Petroleu	m Corporation	
Address		
275 US Highway 64 F	armington, NM 87401	
Reason(s) for filing (Cheek proper box)	<u> </u>	
	Change in Transporter of:	
New Well	□ ou □ xom	Ges
Recompletion	Casinghead Gas Co	ndensæte
Change in Ownership		
If change of ownership give name		
and address of breatons owner.		
II. DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, including Fo	action
Leese Name		
Culpepper Martin	4M Blanco Mesa	verde
1		
Unit Letter J : 1720	_ Feet From The _ South Lin	and
Line of Section U6 Towns	ship 31N Range	12W
III. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL	<u>GAS</u>
Name of Authorized Transporter of Oli	or Condensate VV	Addres
Name of Au(Res) I am I followed the Committee of the Comm		ł
Name of Authorized Transporter of the	In ans	<u> </u>
Conoco. Inc. Surface	Irans.	Addres
Conoco Inc. Surface	Trans.	Addres
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Conoco. Inc. Surface Name el Authorized Transporter el Casin Sunterra Gas Gatherin	Trans. Ighedd Gas or Dry Gas XX G Company Unit Sec. Twp. Rge.	Addres
Conoco. Inc. Surface Name of Authorized Transporter of Casin Sunterra Gas Gatherin If well produces oil or liquids, eite lection of tanks.	Trans. Igheod Gas Or Dry Gas XX G Company Unit Sec. Twp. Ree.	Address Is gas
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(Tule)

(Date)

June 17, 1987

EXICO 87501

Form C-104

Fee

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LLOWABLE

RT OIL AND NATURAL GAS D_{IS}

Other (Please explain)

Kind of Lease State, Federal or Fee

	413
P O Box 1809, Bloomfield, NM 87	7413
P. O. Box 1809, Bloomfield, NM 87	7413
P. D. Box 1809 Bloomfield NM 87	7413
s ectuelly connected?	
<u> </u>	
commingling order numbers	
commingling order numbers	
	
OIL CONSERVATION DIVISION	
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PROVED	~ ~
South History	
John Jave	
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SUPERVISOR DISTRICT	3
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This form is to be flied in compliance with AU	LE 1184
If this is a request for allowable for a newly dr	-
If this is a request for allowedle for a nawly are	
ili, this form must be accompanied with AULE	111.
Its them on the new more and the dilet and same	-1-4-1 (
to taken on the west to second be filled and com	_1

Fill out only Sections L. H. III. and VI for changes of a name or number, or transporten or other such change of cond

Separate Forms C-104 must be filed for each peel in me ploted wells.

		Oll Well	Gas Well	New Well	Workever	Deepen	Plus Best	Same Res'y.	' Diff. Rest
Designate Type of Complete	tion — (X)	OII WAIT	1 242 441	1	1	1	1	1	1
Date Spudded		le Roody to P	rod	Total Dopth		<u> </u>	P.B.T.D.	·	·
		oducing Form	·	Top Oll/Ge	Per		Tubing Des	<u></u>	
Elevations (DF, RKB, RT, GR, etc.,	, Name of Pr	oddering i on							
Perferences							Depth Gasts	ng Shoo	
		TUBING,	CASING, AN	D CEMENTI	NG RECOR)			
HOLE SIZE	CASI	NG & TUBI			DEPTH SE			CKS CEME	47
				 					·
									
V. TEST DATA AND REQUES	T FOR ALL	WABLE (Test must be able for this d					qual to or esc	eed top allo
Date First New Oil Run To Tanks	Date of Te	•t		Producting 1	dethod (Flow	lift, ete.)			
	1								
Longth of Tool	Tubing Pre	06M0		Casing Pre	58W9		Choke Size		
Longth of Toot Actual Prod. During Toot	Tubing Pre			Casing Pro		· · · · · · · · · · · · · · · · · · ·	Cheke šize		
Actual Prod. During Test		008W0					Gas - MCP		
				Water - 8 bla			Gas - MCP	Condensets	

STATE OF NEW MEXICO. ENERGY MID MINERALS DEPARTMENT

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DISTRIBUTIO	**		
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FILE			
U.S.G.J.			Ь.
LANG OFFICE		_	<u> </u>
TRANSPORTER	OIL	<u> </u>	<u> </u>
	646	<u> </u>	<u> </u>
OPERATOR		├	! -
BESSATION OF	ree.	1	l l

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

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

Separate Forms C-104 must be filed for each pool in manufacted wells.

FILE	AAR	ITA FE, NEW	MEXICO 87501	11 - 2 - 1	
LANG OFFICE				Allina Paragonia	
CAMPOOTES OIL		REQUEST FOR	ALLOWABLE		
PERATOR		At	40		
PROBATION OFFICE	AUTHORIZAT	ION TO TRANSF	PORT OIL AND NAT	URAL GAS	
perolof		_			
Union Texas Petro	leum Corporatio	<u>on</u>			
daress	r en de la	M 07/101			
375 US Highway 64	, Farmington, N	0/401	Other (Plea	se esplain)	
looson(s) for filing (Check proper	change is Tran	anorier of:			
New Woll	Oil		y Gas		
Recompletion	Casinghea	~	ondensate		
Change in Ownership					
change of ownership give ner	I ●		•		
nd address of previous owner_					
- PROGRAMON OF WEIL	AND IFASP				
I. DESCRIPTION OF WELL	Well No. Pool	Name, including F	ormation	Kind of Lease	Lease
Culpepper Martin	4M 1	Basin Dakota	1	State, Federal or Fee	<u>} ee</u>
-	720 Feet From Th	· South Li	ne and1725	Feet From The East	
Unit Letter J : 1				C 1	ian Co
Line of Section 06	Township 31N	Range	12W , NM	PM. San Ji	uan co
		_	-		
III. DESIGNATION OF TRA	NSPORTER OF OIL	AND NATURA	L GAS	es to which approved copy of this	form is to be sent,
Name of Authorized Transporter o	(OII or Conder	peare (XX	D O Pay		
Conoco, Inc. Surfa	ce Trans.	or Dev Cos W	Address (Give addre	1429 Bloomfield NM	form is to be sent
		a 517 515 (XX		1809. Bloomfield. NM	
Sunterra Gas Gathe	ring Company	Twp. Rge.	is gas actually conn	ected? When	
If well produces oil or liquide,		4 =		!	
aire legition of lents.			· · · · · · · · · · · · · · · · · · ·	rdes numbers	
If this production is commingie	d with that from any of	her lease or pool	' Rias communitative o		· · · · · · · · · · · · · · · · · · ·
NOTE: Complete Parts IV	and V on reverse side	if necessary.			
NOTE: Complete 12-2 17			1 01	CONSERVATION DIVISI	ON
VI. CERTIFICATE OF COME	PLIANCE				•
I hereby certify that the rules and re		varion Division have	APPROVED_	<u> </u>	1984 19
I hereby certify that the rules and re- been complied with and that the info	turation given is true and co	emplete to the best of		5 8 1 1 (C)	
my knowledge and belief.		•	87	John Jan Jan Jan Jan Jan Jan Jan Jan Jan Ja	X
			TITLE	SUPERVISOR DIST	PICT AT A
		,	16		
///-			This form i	s to be filed in compliance wi	NE RULE 1100.
hobber C	. Jana		II	request for allowable for a ne- must be accompanied by a tab	MENDE OF MA
	(Signature)		ii teete tekse es i	TO MOT TO SECRETARISM AND A	VEE
Permit Coordinato			All section	and this form must be filled on	st completely for
	(This)		900 200 مو ملطم أأ	Lecoubleton merre-	
June 17, 1987			Fill out on	ly Sections I. II. III. and VI abor, or transportes or other su	ch change of col
	(Dese)		. [] 4447 3500 4 44		

(Dete)

V. TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Longth of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D	Tubing Pree Oil-Bbis.	s we	est must be ble for this d	Producing Casing Pro Water - Bbi Bbie, Com	Method (Flow	r, pump, gas	Choke Sise	Candensella		
OIL WELL Date First New Oil Run To Tanks Longth of Teet Actual Prod. During Teet	Date of Tee Tubing Pres		eet must be ble for this d	Producing Casing Pro	Method (Flow		Choke Sise			
OIL WELL Date First New Oil Run To Tanks Longth of Test	Date of Tee Tubing Pres		est must be ble for this d	Producing Casing Pro	Method (Flow		Choke Sise		2004 109 41	
OIL WELL Date First New Oil Run To Tanks	Date of Tee		est must be i bla for this d	Producing	Method (Flow		Choke Sise		seeed 109 all	
V. TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tenks			est must be a ble for this d						2000 109 41	
V. TEST DATA AND REQUEST	FOR ALLO	WABLE σ	eet must be i ble for this d				14001 10 10 0	secod top all		
HOLE SIZE	CASIN	CASING & TUBING SIZE			DEPTH SE		SACKS CEMENT			
		TUBING, C	ASING, AN	D CEMENTI	NG RECOR	D [']				
Perference							Depth Casu	nq 5h00		
Eleveticas (DF, RKB, RT, GR, etc.)	Name of Pro-	ducing Forma	ntica 	Top Oll/Go			Tubing Depth			
Date Spudded	Date Chapte			Total Depti	b		P.S.T.D.			
Designate 1/pe of Compton		Reedy to Pro	-	+	<u> </u>	<u> </u>				
Designate Type of Completi	ion — (X)	Oil Well Ready to Pro	Gas Well	New Well	Workever	Deepen	Plug Back	Same Resh	v. Dill. Rest	