

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Union Texas Petroleum Corporation		Well API No. 30-045-28124
Address P. O. Box 2120, Houston, Tx 77252-2120		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input type="checkbox"/> Other (Please explain:) Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Johnston Federal	Well No. 28	Pool Name, including Formation Basin (Fruitland Coal)	Kind of Lease State, Federal or Res XXXX	Lease No. SF-078439
Location Unit Letter L : 2255 Feet From The South Line and 1065 Feet From The West Line Section 33 Township 31N Range 9W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Meridian Oil, Inc.	or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499				
Name of Authorized Transporter of Casinghead Gas El Paso Natural Gas Co.	or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4990, Farmington, NM 87499				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? No	When? 1-27-91

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
Date Spudded 7-11-90	Date Compl. Ready to Prod. 12-27-90	Total Depth 3240	P.B.T.D. 3196					
Elevations (DF, RKB, RT, GR, etc.) 6362	Name of Producing Formation Fruitland Coal	Top Oil/Gas Pay 2982	Tubing Depth 3169					
Performances			Depth Casing Shoe					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 12 1/4" 8 3/4"	CASING & TUBING SIZE 9 5/8" 7		DEPTH SET 382 2939		SACKS CEMENT 210 420			

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 Tank	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	Length of Test 15 hrs.	Bbls. Condensate/NGL	Gravity of Condensate
Testing Method (pilot, back pr.) pilot	Tubing Pressure (Shut-in) 100	Casing Pressure (Shut-in) 575	Choke Size Open

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Signature
Ken White, Regulatory Permit Coord.
Printed Name
1-11-91 713/968-3654
Date
Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 25 1991

By Original Signed by FRANK T. CHAVEZ

Title SUPERVISOR DISTRICT # 3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.