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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

Operator <b>Universal Resources Corporation</b>	
Address <b>910 Nat'l Foundation W. Bldg., 3555 NW 58, Okla. City, Okla. 73112</b>	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input checked="" type="checkbox"/>	Change transporter of dry gas from NW Pipeline Corp. to read El Paso Natural Gas Company
Change in Ownership <input type="checkbox"/>	

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>State Comm</b>	Well No. <b>2</b>	Pool Name, including Formation <b>Blanco Mesaverde</b>	Kind of Lease State, Federal or Fee <b>State</b>	Lease No. <b>LC-0038</b>
Location Unit Letter <b>N</b> ; <b>1730'</b> Feet From The <b>East</b> Line and <b>185'</b> Feet From The <b>North</b> Line of Section <b>16</b> Township <b>32N</b> Range <b>12W</b> , NMPM, <b>San Juan</b> 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"/> <b>Plateau Inc.</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 108, Farmington, New Mexico 87401</b>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <b>El Paso Natural Gas Co.</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 990, Farmington, New Mexico</b>	
If well produces oil or liquids, give location of tanks.	Unit <b>GR 6013'</b>	Sec. <b>Point Lookout</b>
	Twp. <b>32N</b>	Rge. <b>12W</b>
	Is gas actually connected? When <b>Yes</b> <b>Awaiting approval C-104</b>	

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.
			<b>XX</b>						
Date Spudded <b>8-19-74</b>	Date Compl. Ready to Prod. <b>9-18-74</b>		Total Depth <b>4925'</b>		P.B.T.D. <b>4894'</b>				
Elevations (DF, RKB, RT, GR, etc.) <b>GR 6013'</b>	Name of Producing Formation <b>Point Lookout</b>		Top Oil/Gas Pay <b>4590'</b>		Tubing Depth <b>4557'</b>				
Perforations						Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
<b>12-1/4"</b>	<b>8-5/8" (new)</b>		<b>238'</b>		<b>160</b>				
<b>7-7/8"</b>	<b>4-12" (new)</b>		<b>4,925'</b>		<b>350</b>				

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be shut in for 24 hours 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
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.

**U. N. Baker**  
(Signature)

**Production Agent**  
(Title)

**May 2, 1975**  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED **MAY 5, 1975**  
By **Original Signed by Emery C. Arnold**  
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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.