STATE OF NEW MEXICO. ENERGY MID MINERALS DEPARTMENT

Permit Coordinator

June 24, 1987

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SANTA FE			_
FILE			
U.S.O.A.		Щ	_
LAND OFFICE		Ш	_
TRAMPPORTER	91		
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OPERATOR			
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OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 8 1801

Form C-104 Revised 10-01-78 Format 08-01-83

All sections of this form must be filled out completely for on new and recompleted wells.

Reportio Forms G-104 must be filed for each pool in t

nly Sections L. II. III. and VI for changes of mbos, or transportes or other such change of co

TRAMSPORTER GAS	_	FOR ALLOWABLE	JUN301587	<i>√</i>
PROBATION OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND	NATURAL GAS	
l				
Union Texas Petro	Jaum Cornoration		·	
144				
375 US Highway 64	, Farmington, NM 87401	- Other	(Please espiain)	
Roosen(s) for filing (Check prope	r bes)	Other	(Liggia arbiam)	
New Well	Change in Transporter eli	XX Dry Ges		
Recompletion	Casinghead Gas	Condensate		
Change in Ownership				
If change of ownership give na	C4			
and eddress of previous owner				
II. DESCRIPTION OF WELL	AND LEASE	sing Formation	Kind of Lease	Legad
Leese Name		Gallup	State, Federal or Fee	NM11124-39
Wright State Com			.	
Location 1	550 Feet From The South	Line and	90 Feet From The <u>East</u>	·
			NMPM. San	Juan co
Line of Section 36	Township 32N Fand	• 13W	, NMPM, Jan	<u></u>
		TIRAL GAS		to the form to to be sent
Name of Authorized Transporter	ANSPORTER OF OIL AND NAT	Andress (Give	eddress to which approved copy o	(ALL) (STATE)
Conoco Inc Surfa	ce Trans.	P. O. Bo	x 1429 Bloomfield.	I has form as to be sens
Name of Authorises Transporter	ce Trans.	Address (Cine	x 1809. Bloomfield.	NM 87413
Sunterra Gas Gathe	ring Company	b 0 R0	ennected? When	INC. CO TIME
If well produces oil or liquids,	ONLY See.	1.3W		3
			ing order numbers	
If this production is comming	jed with that from any other lease or	, pec., 5		
NOTE: Complete Parts IV	and V on reverse side if necessary	<i>).</i>		
	-		OIL CONSERVATION DI	VISION
VI. CERTIFICATE OF COM	PILANCE	a have APPROVE	JUN 3 0 198	<u>'/</u> , 19
I hereby certify that the rules and	regulations of the Oil Conservation Divisio formation given is true and complete to the	best of	3 (1)	
been complied with and that the in my knowledge and belief.	Management Street in more and combined	87	Day Ch	5
to your and a second		TITLE	SUPERVISION DIST	RICT
<i></i>			orm is to be filed in complian	se with RULE 1184.
Watert	C. Trank	II		
	(Signature)	well, this	is a request for allowable for form must be accompanied by a on the well in accordance w	ttp warreness or ma or
	_	E laber lawar	,	and and annual acolor for

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io a – (X)	Ott Mett	Ges well	Ned Aett	1072010	Cooper	P100 5002	I	i Dur Ne
Dete Comp	L Reedy to F	Prod.	Tetal Dept		_	P.B.T.D.		
Name of Pr	oducing for	metica	Top OU/G	se Pey		Tubing Deg	ch	
_1						Depth Cast	ng Shee	
	TUBING,	CASING, AN	D CEMENT	NG RECOR	0			
CASI	NG & TUB	ING SIZE	 	DEPTH SE	IT	<u>s.</u>	ACKS CEME	NT
_								
T FOR ALL	WABLE	Test must be a	efter recovery	of total volu	ne of load of	l and must be	1944 to er eze	red top a
Date of Te	•1		Producing	Method (Flow	, pump, cas	lift, etc.)		
Tuesng Pre	108W0		Casing Pr			Chete Sise)	
Oil-Shie-			water - Bbi	••		Gee - MCF		
		·						
			T-512 - 622	4		Commer of	Contenante	
Langth of	T•et		asis. Con	S GRANT O/ NOW,				
Tubing Pro	***** (FAS	his)	Casing Pr	essure (EDW	-in)	Chete 819		
	CASI T FOR ALLO Date of Te Tubing Pro Oil-Bbie.	TUBING, CASING & TUB TOR ALLOWABLE Tubing Pressure Oil-Bhis.	Date Compi. Recety to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE TFOR ALLOWABLE (Test must be able for this d Date of Test. Tubing Pressure Oil-Baie.	Date Compl. Ready to Prod. Date Compl. Ready to Prod. Total Dept.	Date Compi. Reedy to Prod. Date Compi. Reedy to Prod. Top Oll/Gas Pay TUBING, CASING, AND CEMENTING RECOR CASING & TUBING SIZE DEPTH SE TFOR ALLOWABLE (Test must be after recovery of total volumble for this depth or be for full 24 hours Date of Test Tubing Pressure Casing Pressure Oil-Bbie. Langth of Test Bbie. Condensate/ASAC	Date Compil. Ready to Prod. Date Compil. Ready to Prod. Top Oll/Gas Pay TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE DEPTH SET TFOR ALLOWABLE (Test must be after recovery of total volume of load of able for this depth or be for full 24 hours) Date of Test Tubing Pressure Casing Pressure Oil-Bbis. Water-Bbis.	Date Compi. Resty to Prod. Date Compi. Resty to Prod. Total Depth Tubing Depth TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE DEPTH SET S. TFOR ALLOWABLE (Test must be after recovery of total volume of lead oil and must be able for this depth or be for full 24 hours) Date of Test Tubing Pressure Casing Pressure Casing Pressure Chaire Size Oil-Bhis. Water-Bhis. Gen-MCF	Date Compi. Restly to Prod. Date Compi. Restly to Prod. Total Depth Top Oll/Gas Pay Tubing Depth Depth Casing Shee TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE DEPTH SET SACKS CEME TFOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to a said for this depth or be for full 24 hours) Date of Test Tubing Pressure Casing Pressure Casing Pressure Casing Pressure Chair Size Casing Pressure Chair Size Langth of Test Bile. Candenagte/AMCF Gravity of Candenagte Langth of Test Candenagte

STATE OF NEW MEXICO. ENERGY AND MINERALS DEPARTMENT

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TRAMSPORTER	GAS	<u> </u>	
OPERATOR			L
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June 24, 1987

(Date)

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

Form C-104 Revised 10-01-78 Format 08-01-83 Page 1

ratio Forms G-104 must be filed for each pool in :

LAND OFFICE			37	4
TRAMSPORTER GAS	REQUE	ST FOR ALLOW	ABLE	
OPERATOR		AND	AND NATION CAS	
PROBATION OFFICE	AUTHORIZATION TO T	TRANSPORT OIL	, AND NATURAL GAS	
•				
Union Texas Petroleu	m Corporation			
375 US Highway 64, F	armington, NM 8740)1		
Reason(s) for filing (Check proper bez)	,		Other (Please explain)	
Reason(s) for titing (Chees proper	Change in Transporter of:			
Recompletion	O11	XXX Dry Ges		
Change in Ownership	Casinghead Gas	Condensete		
change of ewnership give name				
nd address of previous owner				
I. DESCRIPTION OF WELL AN	D LEASE	Ludina Formation	Kind of Lesse	Leas
Leese Name	l i		Sicte, Federal or Fee	NM11124-39
Wright State Com		Dakota		
Location			790 Feet From The Eas	t
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		100	l'an	Juanc
Line of Section 36 To	waship 32N Re	ange I 3W	, (0.00)	
		ATTIBAL CAS		
IL DESIGNATION OF TRANS Name of Authorized Transporter of Or	PORTER OF OIL AND NA	ATURAL GAS	(Give address to which approved copy o	f this form is to be sent
Name of Authorized Transporter of Ol	- a cantonia ALLA	D (O. Box 1429, Bloomfield, of Give address to which approved copy o	NM 87413
Conoco, Inc. Surface	inans.	Address	(Give address to which approved copy o	I this form is to be sen
Name of Authorized Transporter of Co		P	O. Box 1809, Bloomfield.	NM 87413
Sunterra Gas Gatherin	g Company	Ree. Is que	setually connected? When	
If well produces oil or liquide,	, Carrier 1 and 1	13W	!	
			ation arise support	
give location of vants. If this production is commingled w	ith that from any other lease	or pool, give con	wareding aides nomes.	
NOTE: Complete Parts IV and	V on reverse side if necess	ery.		
NOTE: Complete Parts IV and		ı	OIL CONSERVATION D	IVISION
VI. CERTIFICATE OF COMPLL	ANCE	l l	JUN 9 0	1007
VI. CERTIFICATION OF COMME	Oil Commiss Dir	isian haw APP	ROVED	, 19
I hereby certify that the rules and regule been complied with and that the informs	cions of the Oil Complete to	the best of	B. ()	£
my knowledge and belief.	non Biven a man man owner	87_		8
my and water and com-		II	SUPERVISION DI	STRICT & 3
		ודוד מ	,8	
11+0-	¬ //	H	This form is to be filed in complian	RO WITH RULE 1104
Koles CC	rank	#	If this is a request for allowshis for this form must be accompanied by	a tabulation of the
Bio	maters)	well	, this form must be secondaries by	ALL AVLE 111.
Permit Coordinator			And annual and their form most be the	ied out completely fo
	'tele)	منج	on new and recompleted wells.	

Designate Type of Comple	0	II Well	Ges Well							
5 Type of Compt	atton - (X)		, and matt	New Well	Workever	Deepe			_	
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		10 PIO	4.	Total Dopth		<u> </u>			i	1 - 114
evellens (DF, RKB, RT, GR, etc.							P.	S.T.D.		
ar it i da, vie.	Name of Produc	ing Formet	100	Top OU/Ges			.			
erierations				1.00000	Pey		Tu	bing Dept		
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HOLE SIZE	CASING	BING, CA	SING, AND	CEMENTIN	GRECORO					
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TEST DATA AND REQUES							\pm			
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TEST DATA AND REQUEST DIL WELL	FOR ALLOWA	BLE (Tere	must be after	r recovery of	iotal valuma	of load a	Wass ==			
TEST DATA AND REQUEST DIL WELL First New Oll Rus To Tanks	FOR ALLOWAE	BLE Tore ablo	must be after	ir recovery of i	iotal valuma (of load o	il and me	et be sem		ed top all
TEST DATA AND REQUEST DIL WELL First New Oll Run To Tanks	FOR ALLOWAE	BLE (Toes able)	must be after for this dept.	ir recovery of it is a factor of the for full interesting metions.	icial volume (1 24 hours) nod (Flow, pu	of load o	il and ma	et be sem		ed top all
TEST DATA AND REQUEST DIL WELL FIRST NEW OIL RUR TO TORKS		BLE (Toos able)			(Flow, pu	of load o	il and ma	et be sem		ed top all
gih of Teat	FOR ALLOWAE	BLE (Tees able)			(Flow, pu	of load o	lift, ete.)	as be aque		ed top all
gih of Teat	Tubing Pressure	BLE (Tees able)		ir recovery of i A or be for full Producing Meti Casing Pressur	(Flow, pu	of load o	lift, ete.)	et be sem		ed top all
gih of Teat		BLE (Tees able)		Casing Pressu	(Flow, pu	of load o	lift, ete.)	as be aque		od top all
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sih of Test	Tubing Pressure	BLE (Tees able)		Casing Pressu	(Flow, pu	of load a	lift, ete.)	es be eque		ed top all
al Pred. During Test WELL	Tubing Pressure	BLE (Tees able)		Casing Pressu	(Flow, pu	of load o	Char	es be eque		ed top all
QI Pred. During Test WELL	Tubing Pressure Oil - Shie.	BLE Tees able		Casing Pressu	(Flow, pu	of load o	Char	es be eque		ed top all
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WELL I Prod. Test-MCF/D	Tubing Pressure Oil-Ship. Length of Test		, d	Casing Pressu	•	of load o	Cheze	es be eque	si so er eree	ed top all
WELL I Prod. Test-MCF/D	Tubing Pressure Oil-Ship. Length of Test		C	crer - Bbie.	•/AACF	mp, joi	Cheze	es be eque	si so er eree	ed top all
WELL I Prod. Test-MCF/D	Tubing Pressure Oil - Shie.		C	casing Pressur	•/AACF	mp, joi	Cheze	si be eque	si so er eree	od top all