	NO. OF COPIES RECEIVED	1		
	DISTRIBUTION		NSERVATION COMMISSION	Form C-104
	SANTA FE	1	OR ALLOWABLE	Supersedes Old C-104 and C-1
	FILE		AND	Effective 1-1-65
	U.S.G.S.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GAS	5
	LAND OFFICE			
	TRANSPORTER OIL			
	GAS	4		
	OPERATOR PROBATION OFFICE	1		
1.		<u></u>		· · · · · · · · · · · · · · · · · · ·
	Union Pacific Reso	ources Company		
	Address			
	1400 Smith Street,	, Suite 1500, Houston, TX		
	Reason(s) for filing (Check proper box,		Other (Please explain)	
		Change in Transporter cf: Oil Dry Gas		e change only.
	Recompletion	Casinghead Gas Condense		e change only.
	If change of ownership give name	Champlin Petroleum Company	y, 1400 Smith St., Suite	1500, Houston, TX
	and address of previous owner			
11.	DESCRIPTION OF WELL AND	LEASE	ration Kind of Lease	
Ì	Lease Name	Well No. Pool Name, Including For	State Federal o	Eese -
	State 5-8-33	3 Chaveroo (Sar	1 Andres)	Fee State NM 5144
	Location		660	West
	Unit Letter L : 198	BO Feet From The South Line	and bbU Feet From The	
	5	vnship 8-S Bange 33-	-E , NMPM, Cb	aves Country
	Line of Section 5 Tov			
111	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS	j	
	Name of Authorized Transporter of Oli	or Condensate	Aiaress (Give address to which approved	copy of this form is to be sent.
l	Molie Pipeline			
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas		
	Cities Service Compar		Box 300, Tulsa, OK 74	102
	If well produces cil or liquids,			10-12-76
	give location of tanks.	A second s	Yes	10-12-70
		th that from any other lease or pool, g		
IV.	COMPLETION DATA Cil Well Gas Well New Weil Workover Deepen Plug Back Same Besth Dirf. Bes			
	Designate Type of Completio	$\operatorname{on} = (\mathbf{X})$		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
			· · · · · · · · · · · · · · · · · · ·	Tuping Depth
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Dill Gas Pay	.uping Lepin
				Depth Casing Shoe
	Perforations			
	TUBING, CASING, AND CEMENTING RECORD			
		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	HOLE SIZE			
v	TEST DATA AND REQUEST F	OD ALLOWARIE (Test must be all	ter recovery of total volume of load oil a	
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be afi able for this dep	ter recovery of total volume of load oil a oth or be for full 24 hours)	nd must be equal to or exceed top ai.
V.		OD ALLOWARIE (Test must be all	ter recovery of total volume of load oil a	nd must be equal to or exceed top ai.
V.	OIL WELL Date First New Cil Hun To Tanks	OR ALLOWABLE (Test must be afi able for this der Date of Test	ter recovery of total volume of load oil a oth or be for full 24 hours) Producing Method (Flow, pump, gas lift	nd must be equal to or exceed top ai.
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V.	OIL WELL Date First New Cil Run To Tanks Length of Test	TOR ALLOWABLE (Test must be affected by able for this dependence) Date of Test Tubing Pressure	ter recovery of total volume of load oil a oth or be for full 24 hours) Producing Method (Flow, pump, gas lift	nd must be equal to or exceed top ai. , etc.)
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