

Submit 5 Copies
A Petroleum License Office
P.O. Box 1080, Hobbs, NM 88240

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State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-104
Revised 1-1-87
See instructions
on bottom of page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. OPERATOR		Well API No.
Williams-Cody, Inc.		30-025-25011
ADDRESS		
16825 Northchase Drive, Suite 1200, Houston, Texas 77060-6080		
Reason(s) for Filing (Check proper box)		
☐ New Well	☐ Change in Transporter of:	☐ Other (Please explain)
☐ Recompletion	Oil ☐ Dry Gas ☐	
☒ Change in Operator	Conventional Gas ☐ Condensate ☐	
If change of operator give name and address of previous operator		
Ultramar Oil & Gas Ltd. (same as above)		

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease Same, Partial or Fee	Lease No.
Shipp 34	1	West Knowles (Drindard)	Same, Partial or Fee	Fee
Location				
Unit Letter	K	1980	Feet From The South	1980
Section	34	Township	16-S	Range
			37-E	NORTH
			Lea	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
Texaco Trading & Transportation	P.O. Box 1295 - Midland, Texas 79702					
Name of Authorized Transporter of Conventional Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
J.L. Davis	P.O. Box 3179 - Midland, Texas 79702					
If well produces oil or liquid, give location of tanks	Link	Sec.	Twp.	Rgn.	Is gas actually compressed?	When?
	K	34	16-S	37-E	Yes	6-8-75

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	Leakoff	Plug back	Same has v	Diff has v
Disc Spacing	Liner Comp. Run to Pack		Total Depth		P.E.T.D.			
Elevations (DF, RKE, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Timing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of most volume of test oil and must be equal to or exceed low allowable for that 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	Timing Premium	Casing Premium	Check Size
Actual Prod. During Test	Oil - Bbl.	Water - Bbl.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Initial Condensate/MVCF	Gravity of Condensate
Producing Method (Junk, once pr.)	Timing Premium (Shut-in)	Casing Premium (Shut-in)	Check Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been reviewed with me and that the information given above is true and correct to the best of my knowledge and belief.

John Curtis
Signature
John Ann Curtis, Supervisor-Prod. Records
Printed Name
42-28-92 (713) 875-8701
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved

By ORIGINAL SIGNED BY JERRY STATION
DISTRICT SUPERVISOR

Title

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.