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Appropriate District Office
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at bottom of Page

OIL CONSERVATION DIVISION

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

DISTRICT I
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator Ultramar Oil and Gas Limited		Well API No. N/A
Address 16825 Northchase Dr., Ste. 1200 - Houston, Texas 77060		
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)		
New Well ☐	Change in Transporter of:	
Recompletion ☐	Oil ☐	Dry Gas ☐
Change in Operator ☒	Condensate Gas ☐	Condensate ☐
If change of operator give name and address of previous operator Ultramar Production Company - same address as above		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Shipp 34	Well No. 4	Pool Name, including Formation Casey (Strawn)	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Layer <u>N</u> : <u>1980</u> Feet From The <u>West</u> Line and <u>660</u> Feet From The <u>South</u> Line Section <u>34</u> Township <u>16-S</u> Range <u>37-E</u> , <u>NMTPM</u> 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 Condensate 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 liquids, give inclusion of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? Yes	When? 9-17-87

If this production is commingled with that from any other lease or pool, give commingling other number.

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	Water Well	Workover	Deepen	Plug Back	Same Res v	Diff Res v
Date Spudded	Date Comp. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKE, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Unplug Casing Soon			

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 total volume of test oil and must be equal to or exceed test allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Test	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	Bbls. Condensate/MWCF	Gravity of Condensate
Flowing Method (pump, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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 correct to the best of my knowledge and belief.

Signature
Tanya L. Cantrell - Regulatory Assistant
Printed Name
1-1-92 713/874-0700 Title
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JAN 17 '92
By Paul Kautz Orig. Signed by
Geologist
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.