

District I
PO Box 1980, Hobbs, NM 88211-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Grande Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

* Operator Name and Address Universal Resources Corporation P.O. Box 11070 Salt Lake City UT 84147		* UCRID Number 23846
		* Reason for Filing Code CO 1-1-97
* API Number 30 - 0 25-26739	* Pool Name Eunice Monument Grayburg San Andres	* Pool Code 23000
* Property Code 9607	* Property Name R. H. Huston Jr	* Well Number 4

II. Surface Location

Unit or Lot No.	Section	Township	Range	Lot/Block	Feet from the	North/South Line	Feet from the	East/West Line	County
P	8	195	37E		330	S	990	E	Lea

III. Bottom Hole Location

Unit or Lot No.	Section	Township	Range	Lot/Block	Feet from the	North/South Line	Feet from the	East/West Line	County
P	8	195	37E		330	S	990	E	Lea
" Lic Code P	" Producing Method Code P	" Gas Connection Date 2-1-89	" C-129 Permit Number	" C-129 Effective Date				" C-129 Expiration Date	

IV. Oil and Gas Transporters

" Transporter UCRID	" Transporter Name and Address	" TDI	" O/O	" TDI UCSR Location and Description
018053	Pride Pipeline Co P.O. Box 2434 Abilene TX 79604	1848110	C	
20445	Scurlock Permian P.O. Box 4648 Houston TX 77210	1848110	C	
20809	Sid Richardson 201 main St Fort Worth TX 76102	1848130	G	

V. Produced Water

" TDI 1848150	" TDI UCSR Location and Description

VI. Well Completion Data

" Spud Date	" Ready Date	" TDI	" PTD	" Perforations
" Hole Size	" Casing & Tubing Size	" Depth Set	" Sacks Cement	

VI. Well Test Data

" Date New Oil	" Gas Delivery Date	" Test Date	" Test Length	" Test Pressure	" Cig. Pressure
" Casing Size	" Oil	" Water	" Gas	" AOF	" Test Method

" I hereby certify that the rules of the Oil Conservation Division have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:

Julie Bird

Title: Contract Analyst

Date: 2-14-97

Phone: 801-324-2022

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNATURE BY JEFFREY EXTON
DISTRICT 11 MANAGER

Title:

Approval Date:

FEB 24 1997

" If this is a change of operator fill in the UCRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15,025 PSIA at 60°.
Report all oil volumes to the nearest whole barrel.

A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

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

Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filed for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operator unapproved.

1. Operator's name and address

2. Operator's OORIO number. If you do not have one it will be assigned and filed in by the District office.

3. Reason for filing code from the following table:

NW	New Well
RC	Recompletion
CH	Change of Operator
AO	Add oil/condensate transporter
CO	Change oil/condensate transporter
AG	Add gas transporter
CG	Change gas transporter
RT	Request for test allowable (Include volume requested)

If for any other reason write that reason in this box.

4. The API number of this well

5. The name of the pool for this completion

6. The pool code for this pool

7. The property code for this completion

8. The property name (well name) for this completion

9. The well number for this completion

10. The surface location of this completion. NOTE: If the United States government survey designates a Lot Number for this location use that number in the "UL or lot no." box. Otherwise use the OCD unit letter.

11. The bottom hole location of this completion

12. Lease code from the following table:

F	Federal
S	State
P	Fee
J	Jicarilla
N	Navajo
U	Ute Mountain Ute
I	Other Indian Tribe

13. The producing method code from the following table:

F	Flowing
P	Pumping or other artificial lift

14. MO/DA/YR that this completion was first connected to a gas transporter

15. The permit number from the District approved C-129 for this completion

16. MO/DA/YR of the C-129 approval for this completion

17. MO/DA/YR of the expiration of C-129 approval for this completion

18. The gas or oil transporter's OORIO number

19. Name and address of the transporter of the product

20. The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.

21. Product code from the following table:

O	Oil
G	Gas

22. The UL/STR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD", etc.)

23. The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.

24. The UL/STR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CYD Water Tank", etc.)

25. MO/DA/YR drilling commenced

26. MO/DA/YR this completion was ready to produce

27. Total vertical depth of the well

28. Plugback vertical depth

29. Top and bottom perforation in this completion or casing shoe and TD if openhole

30. Inside diameter of the well bore

31. Outside diameter of the casing and tubing

32. Depth of casing and tubing. If a casing liner show top and bottom.

33. Number of sacks of cement used per casing string

The following test date is for an oil well. It must be from a test conducted only after the total volume of fluid is recovered.

34. MO/DA/YR that new oil was first produced

35. MO/DA/YR that gas was first produced into a pipeline

36. MO/DA/YR that the following test was completed

37. Length in hours of the test

38. Flowing tubing pressure - oil wells
Shut-in tubing pressure - gas wells

39. Flowing casing pressure - oil wells
Shut-in casing pressure - gas wells

40. Diameter of the choke used in the test

41. Barrels of oil produced during the test

42. Barrels of water produced during the test

43. MCF of gas produced during the test

44. Gas well calculated absolute open flow in MCF/D

45. The method used to test the well:

F Flowing

P Pumping

G Swabbing

If other method please write it in.

46. The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report

47. The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person

TBD AS 11/1