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

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

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

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 1-1-89
See instructions
at bottom of page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.		Well API No.
Operator	Ultramar Oil & Gas Limited	30-25-30708
Address 16825 Northchase Dr., Ste. 1200 - Houston, Texas 77060		
Reason(s) for Filing (Check proper box)		
New Well	☐	Change in Transporter of:
Recompletion	☐	Oil ☐ Dry Gas ☐
Change in Operator	☐	Conventional Gas ☐ Conventional ☒
If change of operator give name and address of previous operator Santa Fe Operating Partners, L.P., 500 W. Illinois, Ste. 500 - Midland, Texas 79701		

II. DESCRIPTION OF WELL AND LEASE

Lease Name	P.Q. Osudo State Com.	Well No.	1	Pool Name, including Formation	South Osudo Morrow (Gas)	Kind of Lease	State, Federal or Fee	Lease No.	VB-0177
Location									
Unit Letter	G	1980	Feet From The	N	Line and	1980	Feet From The	E	Line
Section	16	Township	21-S	Range	35-E	NMPM	Lea	County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	☐ or Conventional ☒	Address (Give address to which approved copy of this form is to be sent)				
Koch Oil Company		P.O. Box 2256 - Wichita, Kansas 67201				
Name of Authorized Transporter of Conventional Gas	☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)				
Phillips 66 Company		524 Adams Bldg., Bartlesville, Oklahoma 74004				
If well produces oil or liquids, give location of tanks	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
	0	16	21-S	35-E	yes	1-27-91
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	Deepen	Plug Back	Same Res v	Diff Res v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing 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

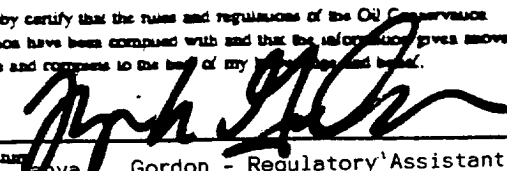
OIL WELL (Test must be after recovery of total volume of liquid oil and must be equal to or exceed 100 allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Conventional/MVCF	Gravity of Conventional
Producing Method (pump, gas lift, etc.)	Tubing Pressure (Sbbls-in)	Casing Pressure (Sbbls-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: 
Cynthia L. Gordon - Regulatory Assistant

Printed Name: _____ Title: _____
Date: 2-8-91 Telephone No.: 713/874-0700

OIL CONSERVATION DIVISION

Date Approved: _____

By: _____

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.