

Submittal 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT III
1000 Rio Brazos 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. Operator		Well API No.
Ultramar Oil & Gas Limited		30-25-30956
Address 16825 Northchase, Ste. 1200 - Houston, Texas 77060		
Reason(s) for Filing (Check proper box)		
New Well ☒	Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐	XX Other (Please explain) Test Allowable of 5000 Barrels and an Emergency Clearance <i>December 1990</i>
Recompletion ☐		
Change in Operator ☐		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE				
Lease Name Phillips State	Well No. 1	Pool Name, including Formation Osudo Morrow (Gas)	Kind of Lease State ☒ Federal Leasehold	Lease No. E 1921
Location				
Unit Letter O	: 990	Feet From The South	Line and 1980	Feet From The East
Section 17	Township 21 South	Range 35 East	NMPM	Lea
County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil Permian	☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183 - Houston, TX 77251				
Name of Authorized Transporter of Casinghead Gas	☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
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 has 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 12468' - 12483'						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 test 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 Condensate/MCF	Gravity of Condensate
Testing 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 <i>Polly A. Koonitz</i>	Supv. of Reg. Affairs
Printed Name Polly A. Koonitz	Title 12-4-90 713/874-0700
Date	Telephone No.

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.