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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

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OCT 29 1976

Operator The Eastland Oil Company ✓		O. C. C. ARTESIA, OFFICE	
Address 704 Western United Life Building, Midland, Texas 79701			
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input type="checkbox"/>		Other (Please explain) CASINGHEAD GAS MUST NOT BE FLARED AFTER 12-13-76 ✓ UNLESS AN EXCEPTION TO Rule 306 IS OBTAINED	
Change in Transporter of: Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/>		Dry Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of ownership give name and address of previous owner			

II. DESCRIPTION OF WELL AND LEASE

Lease Name Union Federal	Well No. 1	Pool Name, Including Formation Esperanza Delaware	Kind of Lease State, Federal or Fee Federal	Lease No. NM0554481
Location Unit Letter L ; 1980 Feet From The South Line and 660 Feet From The West Line of Section 11 Township 22S Range 27E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Union Oil Co. of California-Permian Corp. Trucks Box 3100, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 E	Sec. 11	Twp. 22S	Rge. 27E	Is gas actually connected? No	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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9-12-76	Date Compl. Ready to Prod. 9-28-76	Total Depth 3,600	P.B.T.D. 3,251					
Elevations (DF, RKB, RT, GR, etc.) 3102' GR, 3112' DF	Name of Producing Formation Delaware	Top Oil/Gas Pay 3,091	Tubing Depth 3,244					
Perforations 3,203' - 3,209', 3,091' - 3,098'	Depth Casing Shoe 3,298							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 11	CASING & TUBING SIZE 8-5/8	DEPTH SET 421	SACKS CEMENT 200 sx. Class C 2%CaCl <sub>2</sub>					
7-7/8	4-1/2	3,298	600 sx. Howco-Lite					
			200 sx. 50-50 Class C-					
			Poz w/2% gel					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

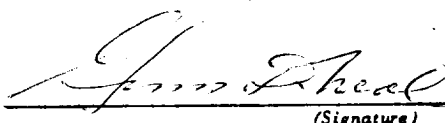
Date First New Oil Run To Tanks 10-13-76	Date of Test 10-19-76	Producing Method (Flow, pump, gas lift, etc.) Pump - 1-1/2" x 10' tubing insert	
Length of Test 24	Tubing Pressure 11-64" SPM	Casing Pressure 25	Choke Size -
Actual Prod. During Test	Oil-Bbls. 18	Water-Bbls. 28	Gas-MCF 4

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

  
George D. Neal  
(Signature)

Superintendent

(Title)

October 25, 1976

(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 29 1976 , 19

BY W. A. Bessett

TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply