

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

Operator UNION OIL COMPANY OF CALIFORNIA DBA UNOCAI Well API No. 30-039-06739

Address P.O. BOX 850, BLOOMF

Reason(s) for Filing (Check proper box) Other (Please explain)

New Well

Recompletion

Change in Operator

If change of operator give name and address of previous operator

*to clear
cut well
This is done w/ OHC
So important for #*

I. DESCRIPTION OF WELL

Lease Name <u>RINCON UNIT (GAL) NP</u>	Well No. <u>150</u>	Pool Name, Including Formation <u>SOUTH BLANCO TOCITO</u>	Kind of Lease State, Federal or Fee	Lease No. <u>SF-079302</u>
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Unit Letter A : 990' Feet From The NORTH Line and 990' Feet From The EAST Line

Section 6 Township 26N Range 6W NMPM RIO ARRIBA County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Authorized Transporter of Oil or Condensate
MERIDIAN OIL 2868467 Address (Give address to which approved copy of this form is to be sent)
P.O. BOX 4289, FARMINGTON, NEW MEXICO 87499

Authorized Transporter of Casinghead Gas or Dry Gas
EL PASO NATURAL GAS COMPANY 2868469 Address (Give address to which approved copy of this form is to be sent)
P.O. BOX 4990, FARMINGTON, NEW MEXICO 87499

Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
<u>A</u>	<u>6</u>	<u>26N</u>	<u>6W</u>	<u>YES</u>	<u>ASAP</u>

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
<u>X</u>	<u>X</u>							

Date Spudded <u>11-6-89</u>	Date Compl. Ready to Prod. <u>11/10/93</u>	Total Depth <u>7355'</u>	P.B.T.D.
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Elevations (DP, RKB, RT, GR, etc.) <u>6542' GR</u>	Name of Producing Formation <u>SOUTH BLANCO TOCITO</u>	Top Oil/Gas Pay <u>6515'</u>	Tubing Depth <u>7355'</u>
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Performances <u>6515' - 6728'</u>	Depth Casing Shoe
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TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>13 3/8" 2327 w/225x</u>	<u>9 5/8" 36# J-55</u>	<u>3154'</u>	<u>175</u>
<u>7"</u>	<u>23# J-55</u>	<u>7116'</u>	<u>126</u>
<u>5"</u>	<u>15# J-55</u>	<u>7514'</u>	<u>125</u>
<u>2 3/8"</u>	<u>4.7#</u>	<u>7355'</u>	

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 Tank <u>11-10-93</u>	Date of Test <u>02/12/94</u>	Producing Method (Flow, pump, gas lift, etc.) <u>GAS LIFT</u>
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Length of Test <u>24 HOURS</u>	Tubing Pressure <u>190</u>	Casing Pressure <u>405</u>	Choke Size <u>48/64</u>
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Actual Prod. During Test <u>130 MCF/D</u>	Oil - Bbls. <u>2</u>	Water - Bbls. <u>0</u>	Gas - MCF <u>130</u>
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GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity/M Condensate
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Testing Method (pucl, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
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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 complete to the best of my knowledge and belief.

Robert L. Caine

Signature Robert L. Caine Production Foreman

Printed Name February 16, 1994 Title (505) 632-1811

Date Telephone No

OIL CONSERVATION DIVISION

Date Approved 4-7-94

By ORIGINAL SIGNED BY ERNIE BUSCH

Title DEPUTY OIL & GAS INSPECTOR, DIST. #3

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.