

OIL CONSERVATION DIVISION

STRICTLY
X Server DD, Azusa, NM 88210P.O. Box 2088
Santa Fe, New Mexico 87504-2088STRICTLY
30 Rio Arriba Rd., Aztec, NM 87410REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator UNION OIL COMPANY OF CALIFORNIA, DBA UNOCAL		Well API No. 300390677800
Address 3300 N. BUTLER, SUITE 200, FARMINGTON NM 87401		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/> Other (Please explain)		
Change is Transporter of: Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
Change of operator give name and address of previous operator		
DESCRIPTION OF WELL AND LEASE		
Well Name RINCON UNIT	Well No. 45	Pool Name, Including Formation PICTURED CLIFFS
Kind of Lease State, Federal or Fee		Lease No. STATE E 289-29
Location Unit Letter N : 990 Feet From The S Line and 1650 Feet From The W Line Section 36 Township 27N Range 07W, NMPLM RIO ARRIBA County		

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil MERIDIAN OIL COMPANY	or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 4289, FARMINGTON NM 87499
Name of Authorized Transporter of Casinghead Gas UNION OIL COMPANY OF CALIFORNIA, DBA UNOCAL	or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 3300 N. BUTLER, SUITE 200, FARMINGTON NM 87401
Well produces oil or liquids, or location of tanks.	Unit N	Sec. 36
	Twp. 27N	Rge. 07W
	Is gas actually connected? NO	When? 4-1-92

this production is commingled with that from any other lease or pool, give commingling order number.

V. 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

VI. 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	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VII. 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.

Signature JIM JOESLIN GENERAL CLERK
Printed Name JIM JOESLIN Title
Date 3-17-92 Telephone No. 505-326-7600

OIL CONSERVATION DIVISION

MAR 3 1 1992

Date Approved

By

Brian D. Chang
SUPERVISOR DISTRICT #3

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.