

Form C-104  
Revised 1-1-89  
See Instructions  
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State of New Mexico  
Energy, Minerals and Natural Resources Department

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 Well API No. n/a

Address P. O. Box 671 - Midland, TX 79702

Reason(s) for Filing (Check proper box) ☒ New Well ☐ Recompletion ☐ Change in Operator ☐ Change in Transporter of: ☐ Oil ☐ Casinghead Gas ☐ Dry Gas ☐ Condensate ☒ Other (Please explain) Filed for record purposes with deviation survey.

If change of operator give name and address of previous operator \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Rincon Unit Well No. 279 Pool Name, including Formation Basin Fruitland Coal Kind of Lease State, Federal or Fee Lease No. SF 079298-D

Location Unit Letter K 1735 Feet From The south Line and 1456 Feet From The west Line  
Section 14 Township 27N Range 7W NMPM Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent) No condensate

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent) El Paso Box 4990 - Farmington, NM 87499

If well produces oil or liquids, give location of tanks. Unit Sec. Twsp. Rgn. Is gas actually connected? When?  
No 3 to 4 weeks

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
		X	X					
Date Spudded 5-11-90	Date Compl. Ready to Prod. 5-27-90		Total Depth 3294'			P.B.T.D. 3290'		
Elevations (DF, RKB, RT, GR, etc.) 6734' GR	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 3124'			Tubing Depth 3179'		
Perforations 3124' - 3239'						Depth Casing Shoe 3293'		

TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>12 1/4"</u>	<u>8 5/8"</u>	<u>362'</u>	<u>450</u>
<u>7 7/8"</u>	<u>4 1/2"</u>	<u>3293'</u>	<u>770</u>
	<u>2 3/8"</u>	<u>3179'</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 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, lift, etc.) \_\_\_\_\_  
Length of Test \_\_\_\_\_ Tubing Pressure \_\_\_\_\_ Casing Pressure \_\_\_\_\_ Choke Size \_\_\_\_\_  
Actual Prod. During Test \_\_\_\_\_ Oil - Bbls. \_\_\_\_\_ Water - Bbls. \_\_\_\_\_

GAS WELL

Actual Prod. Test - MMCF/D 160 Length of Test 24 hours Bbls. Condensate/MMCF 0 Gravity of Condensate \_\_\_\_\_  
Testing Method (pucl, back pr.) Back pr. Tubing Pressure (Shut-in) 460 Casing Pressure (Shut-in) 470 Choke Size 1"

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.

Charlotte Beeson  
Signature Charlotte Beeson - Drlg. Clerk  
Printed Name 6-21-90 Title (915) 682-9731  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUL 27 1990  
By [Signature]  
Title SUPERVISOR DISTRICT #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.