

OIL CONSERVATION DIVISION

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

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator	UNION OIL COMPANY OF CALIFORNIA DBA UNOCAL	Well API No.	30-039-25223
Address 3300 NORTH BUTLER, SUITE 200, FARMINGTON, NEW MEXICO 87401			
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain)			
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	SPLIT CONNECT
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator			

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
RINCON UNIT	182E	UNDESIGNATED GALLUP	FEDERAL	SF-079367A
Location				
Unit Letter	J	1690'	Feet From The	SOUTH
Section	26	Township	27N	Range
			6W	NMPM
			RIO ARRIBA	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized transporter of Oil	<input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
MERIDIAN OIL, INC.		P.O. BOX 4289, FARMINGTON, NEW MEXICO 87499
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
UNION OIL COMPANY OF CALIFORNIA DBA UNOCAL/EL PASO NATURAL GAS CO.		3300 N. BUTLER, SUITE 200, FMGTN, N.M. 87401; P.O. BOX 4939
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	J	26
	Twp.	T27N
	Rge.	R6W
	Is gas actually connected?	When?
	NO	FMGTN., N.M. 87499
		ASAP
If this production is commingled with that from any other lease or pool, give commingling order number:		

IV. COMPLETION DATA

Designated Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res
		X	X					
Date Spudded	Date Comp. Ready to Prod.		Total Depth		P.B.T.D.			
10/06/92	03/27/93		7888'		7840'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
6644' GR	GALLUP		6822'		7737'			
Perforations	6822'-82'; 6914'-48'; 7016'-26' 4SPF 176 SHOTS; 240 SHOTS				Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORDS

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
8 5/8"	24#	370'	SEE ATTACHED
5 1/2"	17#	N-80 & J-55	
2 3/8"	4.7#	J-55	

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS WELL

Actual Prod. test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
289	24 HRS.	0	
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
POSITIVE CHOKE		1550	12/64"

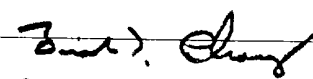
VI. OPERATOR CERTIFICATE OF COMPLIANCE

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.

Signature	
SANDRA K. LIESE	GENERAL CLERK
Printed Name	Title
4/8/93	326-7600
Date	Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 15 1993

By 
Title SUPERVISOR DISTRICT 18

INSTRUCTIONS: This form is to be filled 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.

LEASE NAME & NO.:
API NO.:
STATE OIL & GAS LEASE NO.:
UNIT LETTER:

RINCON UNIT #182E
30-039-25223
SF-079367 A
J SEC. 26-T27N-R6W

CEMENTING REPORT

SURFACE CSG: 250 SX CL "B"

PRODUCTION CSG:

CEMENTED IN 3 STAGES:

1ST STAGE; 380 SX 50-50-4 + 4 TAILED W/ 150 SX PREM CMT
(GOOD CIRCULATION THROUGHOUT STAGE 1)

2ND STAGE; 350 SX 50-50-4 + 4 TAILED W/ 60 SX PERM CMT
(LOST CIRCULATION AFTER 60 BBLS INTO DISPLACE-
MENT. BROKE CIRC. CIRC. & COND. MUD.)

3RD STAGE; 400 SX CL "B"
TAILED W/ 430 SX 50-50-4
(CIRCULATION THROUGHOUT STAGE 3)
(CIRCULATE 250 SX CMT TO SURFACE)