

District I
PO Box 1988, Hobbs, NM 88241-1988
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brava Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-11
Revised February 10, 1995
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address UNION OIL COMPANY OF CALIFORNIA DBA UNOCAL P.O. BOX 850 BLOOMFIELD, NEW MEXICO 87413		OGRID Number 023708
API Number 30 - 0 39-25490	Pool Name BLANCO MESA VERDE	Pool Code 72319
Property Code 011510	Property Name RINCON UNIT	Well Number #176E

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
F	31	27N	6W		1505'	NORTH	1850'	WEST	039

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
F	31	27N	6W		1505'	NORTH	1850'	WEST	039
Lee Code F	Producing Method Code F	Gas Connection Date ASAP	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
007057	EL PASO NATURAL GAS COMPANY P.O. BOX 4990 FARMINGTON, NEW MEXICO 87499	2816101	G	
009018	GIANT REFINING COMPANY 5764 U.S. HIGHWAY 64 FARMINGTON, NEW MEXICO 87401	2816102	0	

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OCT 18 1995

IV. Produced Water

POD 2816103	POD ULSTR Location and Description OIL CON. DIV. DIST. 3
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V. Well Completion Data

Spud Date 07/27/95	Ready Date 09/20/95	TD 7600'	FRTD 7560'	Perforations 5064' - 5474'
Hole Size	Casing & Tubing Size	Depth Set	Socks Cement	
12 1/4"	9 5/8" 36#, J-55	371'	225sx "G" cmt to surface	
8 3/4"	7" 23#&26#, K-55	7599'	1)450sx 50/50poz, 175sx	
			2)400sx 65/35poz, 400sx	
	2 3/8" 4.7#	5420'	50/50poz, 175sx "G" cmt surf.	

VI. Well Test Data

Date New Oil	Gas Delivery Date ASAP	Test Date 09/05/95	Test Length 24 Hrs.	Tbg. Pressure 200 psi	Csg. Pressure 500 psi
Choke Size Open	Oil 2	Water 0	Gas 218 MCF/D	AOF	Test Method Flowing

I hereby certify that the rules 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: *R.L. Caine*

Printed name: R.L. Caine

Title: Production Foreman

Date: Oct. 16, 1995

Phone: (505)632-1811

OIL CONSERVATION DIVISION

Approved by: Original Signed by FRANK T. CHAVEZ

Title: SUPERVISOR DISTRICT # 3

Approval Date: OCT 18 1995

If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

THIS IS AN AMENDED REPORT. CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

rt all gas volumes at 15.025 PSIA at 60°.
rt all oil volumes to the nearest whole barrel.

uest for allowable for a -vly drilled or deepened well must be mpanied by a tabulation of the deviation tests conducted in dence with Rule 111.

ctions of this form must be filled out for allowable requests on and recompleted wells.

t only sections I, II, III, IV, and the operator certifications for es of operator, property name, well number, transporter, or such changes.

erate C-104 must be filed for each pool in a multiple tion.

only filled out or incomplete forms may be returned to re unapproved.

Operator's name and address

Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.

Reason for filling code from the following table:

NW	New Well
RC	Recompletion
CH	Change of Operator
AO	Add oil/condensate transporter
CO	Change oil/condensate transporter
AG	Add gas transporter
CG	Change gas transporter
RT	Request for test allowable (include volume requested)

If for any other reason write that reason in this box.

The API number of this well

The name of the pool for this completion

The pool code for this pool

The property code for this completion

The property name (well name) for this completion

The well number for this completion

is surface location of this completion NOTE: If the nited States government survey designates a Lot Number r this location use that number in the "UL or lot no." box. herwise use the OCD unit letter.

e bottom hole location of this completion

see code from the following table:

Federal
State
Fee
Jicarilla
Navejo
Ute Mountain Ute
Other Indian Tribe

roducing method code from the following table:

Flowing
Pumping or other artificial lift

JA/YR that this completion was first connected to a ransporter

ermit number from the District approved C-129 for ompletion

A/YR of the C-129 approval for this completion

A/YR of the expiration of C-129 approval for this tion

s or oil transporter's OGRID number

ind address of the transporter of the product

number assigned to the POD from which this product ransported by this transporter. If this is a new well mpletion and this POD has no number the district ill assign a number and write it here.

code from the following table:

Oil
Gas

22. The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPO", etc.)
23. The POD number of the storage from which water is moved from the property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.
24. The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPO Water Tank", etc.)
25. MO/DA/YR drilling commenced
26. MO/DA/YR this completion was ready to produce
27. Total vertical depth of the well
28. Plugback vertical depth
29. Top and bottom perforation in this completion or casing shoe and TD if openhole
30. Inside diameter of the well bore
31. Outside diameter of the casing and tubing
32. Depth of casing and tubing. If a casing liner show top and bottom.
33. Number of sacks of cement used per casing string
The following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.
34. MO/DA/YR that new oil was first produced
35. MO/DA/YR that gas was first produced into a pipeline
36. MO/DA/YR that the following test was completed
37. Length in hours of the test
38. Flowing tubing pressure - oil wells
Shut-in tubing pressure - gas wells
39. Flowing casing pressure - oil wells
Shut-in casing pressure - gas wells
40. Diameter of the choke used in the test
41. Barrels of oil produced during the test
42. Barrels of water produced during the test
43. MCF of gas produced during the test
44. Gas well calculated absolute open flow in MCF/D
45. The method used to test the well:
F Flowing
P Pumping
S Swabbing
If other method please write it in.
46. The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report
47. The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person