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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

REQUEST FOR ALLOWABLE
HOBBS AND C.

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FEB 5 7 43 AM '67

Operator	Union Oil Company of California		
Address	P. O. Box 671 - Midland, Texas		
Reason(s) for filing (Check proper box)	Other (Please explain) Temporary Testing into Gas Sales Line as per Verbal Permission - Mr. J. D. Ramey.		
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Foot Name, Including Formation	Kind of Lease
Red Hills Unit	2	Red Hills (Penn.)	State, Federal or Fee Fee
Location	Unit Letter B ; 990 Feet From The North Line and 1650 Feet From The East		
Line of Section	5	Township 26 South	Range 33 East, NMPM, Lea County

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)
Scurlock Oil Company				1501 Houston Club Building - Houston, Texas
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)
El Paso Natural Gas Company				P.O. Box 1492 - El Paso, Texas 79999
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 5	Twp. 26-S	Rge. 33-E
				Is gas actually connected? Yes
				When January 3, 1967 to approx. March 15, 1967

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

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	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
June 28, 1966	November 19, 1966	15,005'	14,945'					
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Red Hills	Pennsylvanian	14,290'	14,291'					
Perforations	Depth Casing Shoe							
14,370' - 14,826'	15,002'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
20"	16"	807'	900
13-3/4"	10-3/4"	5,209'	1600
9-5/8"	7-5/8"	13,087'	1600
6-5/8"	5" Liner	12,822' - 15,002'	600

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 Tanks	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
Temporary testing into Gas Sales line, Flowing at rate of 1.5 MMCF/D on 34/64" Choke,	Tubing Pressure	Casing Pressure	Choke Size
Tubing Pressure 850#. Well making dry gas only, no condensate.			

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

J.F. Wilkinson
District Chief Clerk

February 2, 1967

OIL CONSERVATION COMMISSION

APPROVED _____, 19
BY _____
TITLE _____

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.