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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
OIL AND GAS

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

JUL 13 11 55 AM '67

I. OPERATOR

Operator: **Union Oil Company of California**

Address: **P. O. Box 671, Midland, Texas 79701**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:

Recompletion Oil Dry Gas

Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Turner	Lease No. 660	Well No. 1	Pool Name, including Formation Tatum - Wolfcamp K 3319	Kind of Lease State, Federal or Fee Fee
Location				
Unit Letter D	660 Feet From The North Line and 660 Feet From The West			
Line of Section 5	Township 13-S	Range 36-E	, NMPM, Lea County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Scurlock Oil Company	414 Mid-America Bldg., Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit D Sec. 5 Twp. 13-S Rge. 36-E Is gas actually collected? No When

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 3-24-67	Date Compl. Ready to Prod. 7-10-67	Total Depth 14,146'		P.B.T.D. 10,422'				
Elevations (DF, SS , etc.) 4,023'	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 10,283'		Tubing Depth 10,272'				
Perforations 10,283' - 10,315'					Depth Casing Shoe 10,600'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15"	11 3/4"		327'		300			
11"	8 5/8"		4,461'		550			
7 7/8"	5 1/2"		10,600'		400			
	2 3/8"		10,272'					

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 top allowable for this depth or be for full 24 hours)

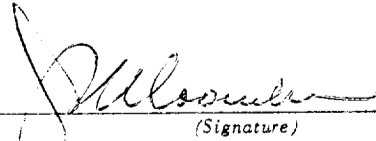
Date First New Oil Run To Tanks 7-10-67	Date of Test 7-10-67	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs.	Tubing Pressure 100 PSI	Casing Pressure PACKER	Choke Size 3/4
Actual Prod. During Test 266	Oil - Bbls. 261	Water - Bbls. 5	Gas - MCF 317

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. 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.


(Signature)

DISTRICT OPERATIONS SUPERINTENDENT
(Title)

July 11, 1967
(Date)

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 only Sections I, II, III, and VI 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.