

# OIL CONSERVATION DIVISION

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

District II  
Drawer DD, Artesia, NM 88210

District III  
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. 30-045-22034
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Address  
3300 NORTH BUTLER, SUITE 200, FARMINGTON, NM 87401

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

Well Completion  Change in Transporter of:  
 Oil  Dry Gas   
 Casinghead Gas  Condensate

Name of operator give name  
Address of previous operator

DESCRIPTION OF WELL AND LEASE				ALLOTTED INDIAN	
Well Name NAVAJO L-12	Well No. 6	Pool Name, Including Formation BASIN DAKOTA	Kind of Lease State, Federal or Fee	Lease No. NOO-C-1420-3780	
Location Unit Letter <u>L</u> : <u>1650</u> Feet From The <u>SOUTH</u> Line and <u>1150</u> Feet From The <u>WEST</u> Line		Section <u>12</u> Township <u>25N</u> Range <u>11W</u> , <u>NMPM</u> SAN JUAN County			

### DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil  or Condensate   
MERIDIAN OIL COMPANY  
Address (Give address to which approved copy of this form is to be sent)  
P.O. BOX 4289, FARMINGTON, NM 87499

Name of Authorized Transporter of Casinghead Gas  or Dry Gas   
UNION OIL COMPANY OF CALIFORNIA, DBA UNOCAL  
Address (Give address to which approved copy of this form is to be sent)  
3300 NORTH BUTLER, SUITE 200, FARMINGTON, NM 87401

Well produces oil or liquids, location of tanks.	Unit L	Sec. 12	Twp. 25	Rge. 11	Is gas actually connected? YES	When? 8-8-77
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Is this production commingled with that from any other lease or pool, give commingling order number.

### COMPLETION DATA

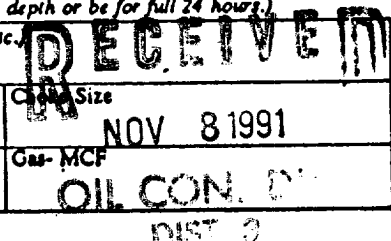
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Deviation (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Information						Depth Casing Shoe		

### TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

### 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 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
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

### I. 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: Sandy Liese  
 Printed Name: SANDY LIESE Title: GENERAL CLERK  
 Date: NOVEMBER 7, 1991 Telephone No.: 505-326-7600

### OIL CONSERVATION DIVISION

Date Approved: NOV 0 8 1991  
 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.