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OPERATOR	<input checked="" type="checkbox"/>	
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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104
Supersedes Old C-104 and C-11
Effective 1-1-65

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

DEC 30 '87

I. Operator
 UNION TEXAS PETROLEUM CORP. ✓
 Address
 P. O. BOX 2120, HOUSTON, TEXAS 77252-2120
 Reason(s) for filing (Check proper box)
 New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate
 Other (Please explain)

If change of ownership give name and address of previous owner

C. C. D.
ARTESIA OFFICE

II. DESCRIPTION OF WELL AND LEASE
 Lease Name Neste 6 Well No. 1 Pool Name, Including Formation N. Shugart Bone Spring
 Wildcat Wolfcamp Kind of Lease State, Federal or Fee State Lease No. LG6384
 Location
 Unit Letter P 660 Feet From The South Line and 660 Feet From The East
 Line of Section 6 Township 18S Range 31E, NMPM, Seller County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
 Name of Authorized Transporter of Oil or Condensate
 Texaco Trading & Transp. Inc. Address (Give address to which approved copy of this form is to be sent)
 P.O. Box 3109, Midland, Texas 79702
 Name of Authorized Transporter of Casinghead Gas or Dry Gas
 Conoco, Inc. Address (Give address to which approved copy of this form is to be sent)
 P.O. Box 2197, Houston, Texas 77252
 If well produces oil or liquids, give location of tanks. Unit P Sec. 6 Twp. 18S Rge. 31E Is gas actually connected? No When 6 weeks

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 Gas Well New Well Workover Deepen Plug Back Same Reservoir Diff. Reservoir
 Date Spudded 10/28/87 Date Compl. Ready to Prod. 12/26/87 Total Depth 10,000 P.B.T.D. 8610
 Elevations (DF, RKB, RT, GR, etc.) 3658 Name of Producing Formation Wolfcamp Bone Spring Top Oil/Gas Pay 8004 Tubing Depth 7918 8428
 Perforations 8004-8300 Depth Casing Shoe 10000
 TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2	13-3/8	651	560
11	8-5/8	2500	850
7-7/8	5-1/2	10000	1275
	<u>2 3/8</u>	<u>8428</u>	

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 12/26/87 Date of Test 12/29/87 Producing Method (Flow, pump, gas lift, etc.) Pump
 Length of Test 24 Tubing Pressure -- Casing Pressure 50 Choke Size --
 Actual Prod. During Test Oil - Bbls. 233 Water - Bbls. 62 Gas - MCF 198

GAS WELL
 Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MCF Gravity of Condensate
 Testing Method (pilot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) 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.
Lu White
 Regulatory Permit Coordinator
 12/29/ 87
 (Signature) (Title) (Date)
 OIL CONSERVATION COMMISSION
 APPROVED MAR 14 1988, 19____
 BY Original Signed By
Mike Williams
 TITLE Oil & Gas Inspector
 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.