## 40. OF COPIES RECEIVED DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION Form C+104 SANTA FE REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 FILE Effective 1-1-65 AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE TRANSPORTER RECEIVED GAS OPERATOR PRORATION OFFICE SEP 27 1965 Operator Union Oil Company of California <del>C. C. C</del> ARTEBIA, OFFICA P. C. Box 671 - Midland Reason(s) for filing (Check proper box) - Midland, Texas, 79701 Other (Please explain) New Well Union Cil Company of California, Change in Transporter of: Recompletion successor by herger, effective August 1, 1905. Dry Gas Change in Ownership X Casinahead Gas Condensate If change of ownership give name The Pure Oil Company - P. O. Box 671 - Midland, Texas, 79701 II. DESCRIPTION OF WELL AND LEASE Well No. Fool Name, Including Formation Lease No. Federal "E" LC-062084 2 Shugart (Y. SR. Q. G.) State, Federal or Fee Federal Location 660 North Line and \_\_\_ 1980 West Feet From The Range 31 East 31 Township 18 South Eddy County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Gil 🛣 Adatess (Give address to which approved copy of this form is to be sent) Texas-New Mexico Pipe Line Company P. O. Box 1510 - Midland, Texas, 79701 Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas X or Dry Gas Phillips Petroleum Company Phillips Building - Cdessa, Texas, 79761 When Sec. Twp. Unit P.çe. is gas actually connected? If well produces oil or liquids, give location of tanks 18-S Yes |31**-**∃ Movember 26, If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well Deepen Plug Back Same Res'v. Diff. Res'v. Designate Type of Completion - (X) Date Compl. Ready to Prod. Total Depth P.3.T.D. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Cil/Gas Pay Tubing Depth Perforations Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE ON. 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 Ccsing Pressure Choke Size Water - Bbls. Actual Prod. During Test Oil - Bbls. Gas - MCF GAS WELL Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate

Casing Pressure

TITLE .

VI. CERTIFICATE UP COMPLIANCE

Testing Method (pitot, back pr.)

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.

Tubing Pressure

7- Wilhinson	
J. F. Wilkinson (Signature)	
District Office Manager	
(Title)	

(Date)

September 7, 1965

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I. H. III. and VI for changes of owner.

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.

Choke Size

OIL CONSERVATION COMMISSION

SEP 2 7 1965

OR APP OAR HERPETTON

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.