	SANTA FE	1	NEW MEX		ONSERV	ATION CC	*1SSION	Form C+104												
4	FILE					LOWABL		Supersedes Of	d C=104 and C-											
	U.S.G.S. RECEIVED BY AUTHORIZATION TO				AND			Ellective)-j-	• 5											
	LAND OFFICE				ANDFUR	I UIL AND	NATURAL (GAS												
	TRANSPORTER OIL	MAY	2 0 1986																	
		l o	. C. D.				•		÷											
	PROFATION OFFICE ARTESIA, OFFICE																			
8 .	Operator																			
	Union Oil Company of California																			
	Address																			
	P. O. Box 671 Midland, Texas 79702 Reoson(s) for filing (Check proper box)																			
	New We!l XX Change in Transporter of:																			
	Recompletion Cil Dry Gas																			
	Change in Ownership	Casingi	head Gas	Conder	nsale															
	If change of ownership give name																			
	and address of previous owner		· · · · · · · · · · · · · · · · · · ·																	
1.	DESCRIPTION OF WELL AND	LEASE																		
	Barclay Federal 1 Wildcat - 77				,				Lease No.											
-	Location	*	MIIUCat	- //	"Jun		State, Federa	lorFoo Federal	NM-22080											
	Unit Letter N ; 66		rom The Sout	h	a and 19	80		- Hont												
			<u> </u>				Feet 7 rom "	The West												
_	Line of Section 1 Tow	vnship 23-	S	Range 3]	<u>l-E</u>	, NMPN	•, Ed	ldy	County											
I.	DESIGNATION OF TRANSPORT	FR OF OF			c															
	Name of Authorized Transporter of Oil		Condensate			(Give address	to which approv	ved copy of this form is i	o be senti											
	None				1			,,	o oc senty											
		Nome of Authorized Transporter of Casingnead Gas or Dry Gas X						ved copy of this form is i	o te sentj											
	New Energy Company			P.ge.	200 N. Loraine Midland, Texas 79701															
	If well produces oil or liquids, Only Sec. 1 wp. Age. give location of tanks.				Yes May 7, 1986															
	If this production is commingled wit	is production is commingled with that from any other lease or pool, give commingling order number																		
7.	COMPLETION DATA																			
	Designate Type of Completio	n = (X)	Uli well	Gas Well X	New Well	Workover	' Deepen t	Plug Back Same Res	'v. Dill. Res'v											
	Date Spudded Date Compl. Ready to Prod.				Total De	pth	· · · · · · · · · · · · · · · · · · ·	P.B.T.D.												
	8-20-84	10 04			15,500'			14,850'												
	Elevations (DF, RKB, RT, GR, etc., 3495' Gr	Name of Producing Formation Morrow			Top Cll/Gas Pay			Tubing Depth												
	Perforations			14,818'		14,754 ' Depth Casing Shoe														
	14,818' - 14,832'	14,818' - 14,832'																		
	TUBING, CASING, AND CEMENTING RECORD																			
}	HOLE SIZE	HOLE SIZE CASING & TUBING SIZE				DEPTH S	ET	SACKS CEMENT												
ł	12-1/4"	·	<u>13-3/8"</u> 10-3/4"			<u>792'</u> 4520'		700												
Ì	9-1/2"	7-5/8"			12600'		2250													
• [4-1/2" Liner	4-1/2" Liner			Top 12219' Btm 15388'			550												
	TEST DATA AND REQUEST FO	me of load oil o	and must be equal to or e	xceed top allow																
ī	DIL. WELL able for this depth or be for full 24 hours) Date First New Cil Bun To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)																			
	Length of Test				Casing Pressure		Chote Size													
-	Actual Pres. During Test				Water-Bbls.			Gae - MCF												
۰ -					د			. <u></u>												
ſ	GAS WELL		- 4	··		·														
	2583	Length of Te 24-3	•1 /4 Hrs		Bbls. Cor	idensate/MMC) 0	F	Gravity of Condensate												
ł	Testing ktothica (pitot, back pr.)		we(Shut-in	}	Casing Fi	essue (Shut	-in)	Choke Size												
ί	Back Pressure	5150		•	Packe	er		Various												
. (CERTIFICATE OF COMPLIANC	E				OIL	ONSERVA	TION COMMISSION	1											
_							JUN 2	6 1986	10											
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given					APPROVED, 19, 19, Original Signed By															
5	shove is true and complete to the best of my knowledge and belief.				BYLes A. Clements															
					TITLE Supervisor District 11															
	DCM lunt J. C. Merritt					This form is to be filed in compliance with RULE 1104.														
7						If this is a request for allowable for a newly drilled or despende														
District Production Supt. (1111e) May 14, 1986					well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with NULE 111. All sections of this form must be filled out completely for allow- able on new and recompleted wells. Fill out only Sections 1. II. III, and VI for changes of owner.															
										•	* 2-3/8" Tubing at 14754' Packer 14754'					well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multiply reported wells.				