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DISTRICT 1
3.0. Box 1980, Hobbs, NM 88240

DUDIN WENT IN SIEL Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

<u>DISTRICT II</u> 2.O. Drawer DD, Artesia, NM 88210

Santa Fe. New Mexico 87504-2088

CISTRICT III
1300 Rio Brazos Rd., Azzec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Defaux					Well	API No.			
Union Oil Company	of Californi	<u>ia</u>							
Address:									
P. O. Box 671 - M	Midland, TX 79	9702							
Reason(s) for Filing (Check proper box)									
New Well	Change in	Transporter of:	Fil	led for record purposes with deviation					
Recompletion	Oil 🗌	Dry Ges		sts.	coora r	or bonen	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11461611	
Change in Operator	Casinghead Gas	Condensate	ue:	ocs.					
If change of operator give name									
and address of previous operator			• • • • • • • • • • • • • • • • • • • •						
IL DESCRIPTION OF WELL	AND LEASE								
case Name		Pool Name, include	ne Formation	ng Formation Kind o			X Lesse Lesse No.		
Rincon Unit	270				Federal or Fee SF079160				
Location							510	77100	
Unit Letter G	. 1658	F . F . W		. 221	1				
Sim Leater	_ :	Feet From The	OFLIL LIN	e and	<u>. </u>	et From The	east	Line	
Cection 12 Townshi		Range 7W	VII.	MPM.	Rio Ar	riba		_	
100	<u>*</u>	TOTAL TOTAL	, , , , , ,	AILIAL	140 111			County	
III. DESIGNATION OF TRAN	SPORTER OF O	II. AND NATII	RAL GAS						
Name of Authorized Transporter of Oil	or Conde			e address to wh	ich approved	com of this i			
Il Meridian Oil	<u>`</u>					, copy o ₇ _j .	W M LE 10 DE 3E	<i>74)</i>	
Name of Authorized Transporter of Casin	shead Gas	or Dry Gas	Address (Give	e address to wh	ich arrenne	م دناه می محمد			
Unknown () Fasc		GUS	,		an approved	copy of this f	OFTH LE 10 DE 36	ni)	
If well produces oil or liquids.				y connected?	When	Then 3			
give location of trains.	, , , , , , , , , , , , , , , , , , , ,		No	,) Wilson	When? 2 to 3 weeks			
If this production is commingled with that	from any other lease or	nool give commisse							
IV. COMPLETION DATA		hourt 8140 constitution	and order mate						
	Oil Well	Gas Well	New Well	Workover	D		1		
Designate Type of Completion		X	X	i Mourroasi	Deepen	Plug Hack	Same Res'v	Diff Resv	
Date Spudded	Date Compi. Ready to		Total Depth	L	L		L		
4-26-90	5–26–90		2790'				P.B.T.D. 2778		
Elevanous (DF, RKB, RT, GR, etc.)	Name of Producing F		Top Oil/Gas Pay						
6459' GR	Fruitland	2627'-2738'			Tubing Depth 2658				
Perforations			2027 -2730						
2627' - 2738' Fruitland Coal							Depth Casing Shoe 2790 1		
2027 - 27			CELCENTER	VC RECOR			90		
HOLE SIZE		CEMENTING RECORD							
12 1/4"	CASING & TO	DEPTH SET			SACKS CEMENT				
7 7/8"	8 5/8 4 1/2"		218'			300			
7 770	2 3/8"		2790			670			
	2 3/0	2658							
V. TEST DATA AND REQUES	ST FOD ALLOW	ADIE	•						
Date First New Oil Run To Tank	recovery of total volume	of toda ou and must					for full 24 hou	rs.)	
Date Fils New Oil Rus 10 120k	Date of Test		Producing Me	ethod (Flow, pu	mp, gas lift, i	etc.)			
Length of Test	T.bi D		Casina Person		14.2	Chales Sin			
Euger of Tea	Tubing Pressure		Casing Pressu	ne	Jan 1	Choke Size			
Actual Prod. During Test	Oil Phi-		Water Dhie			Cor MCC			
Actual Floor During Test	Oil - Bbls.		Water - Bbla.		ي ل	G#- MCF	は		
			·		275.13	Control of the second			
GAS WELL					Cil		DIV.		
Actual Prod. Test - MCF/D	Length of Test		Bbls. Conden	BLE MMCF		Office of Condensate			
325	24 hours	•	0		1	70.0	_		
Testing Method (puot, back pr.)	Tubing Pressure (Shu		Casing Pressu			Choke Size			
Back pressure	310		3	50			_		
VI. OPERATOR CERTIFIC		DITANCE			-				
				DIL CON	SERV	ATION	DIVISIO	M	
hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given above									
is true and complete to the best of my knowledge and belief.			Data America			AUG 1 0 1990			
O(1)	Δ		Date	Approved]				
(harlotte 7	12 ees	\sim			~	. \ -	$\sqrt{}$,	
Signature				By But Chang					
Charlotte Beeson - Drlg. Clerk				SUPERVISOR DISTRICT #3					
Title						oon	CIO I HICT	#3	
6-8-90	(915)682-9		Title		-				
Date	Tele	ephone No.	<u> </u>						

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.