

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Union Oil Company of California		Well API No.
Address P. O. Box 671-Midland, TX 79702/Please send approved copy to:		UNOCAL 3300 N. Butler Farmington, NM 87401
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/>		<input type="checkbox"/> Other (Please explain) Submitted for record purposes with deviation report.
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Rincon Unit	Well No. 272	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Fee	Lease No. SF-079160
Location Unit Letter <u>A</u> : <u>790</u> Feet From The <u>north</u> Line and <u>1200</u> Feet From The <u>east</u> Line Section <u>1</u> Township <u>26N</u> Range <u>7W</u> , NMPM, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil No condensate	or Condensate	Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Casinghead Gas El Paso	or Dry Gas	Address (Give address to which approved copy of this form is to be sent) Box 4990 - Farmington, NM 87499				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?
					No	Negotiating contract
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 Res'v	Diff Res'v
		X	X					
Date Spudded 7-9-90	Date Compl. Ready to Prod. 7-22-90	Total Depth 2972'	P.B.T.D. 2965'					
Elevations (DF, RKB, RT, GR, etc.) 6484' GR	Name of Producing Formation Fruitland Coal	Top Oil/Gas Pay 2814'	Tubing Depth 2870'					
Perforations 2814-2902'	Depth Casing Shoe 2971'							
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8"	356'	350					
7 7/8"	4 1/2"	2971'	260					
	2 3/8"	2870'						

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 Tank	Date of Test	Producing Method (Flow pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D 323	Length of Test 24 hrs.	Bbls. Condensate/MMCF 0	Gravity of Condensate -
Testing Method (prior, back pr.) Back pr.	Tubing Pressure (Shut-in) 275	Casing Pressure (Shut-in) 275	Choke Size 1"

VI. 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.

Charlotte Beeson
Signature
Charlotte Beeson - Drlg. Clerk
Printed Name
8-9-90
Date
(915)682-9731
Telephone No.

OIL CONSERVATION DIVISION
9-7-90
Date Approved SEP 07 1990
Original Signed by CHARLES GUNLSON
By
Title DEPUTY OIL & GAS INSPECTOR, DIST. #1

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.