

District I
PO Box 1900, Hobbs, NM 88241-1900
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Bravo Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-11
Revised February 10, 1991
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address UNION OIL COMPANY OF CALIFORNIA DBA UNOCAL P.O. BOX 850 BLOOMFIELD, NEW MEXICO 87413		OGRID Number 023708
API Number 30 - 039-25490	Pool Name BASIN DAKOTA	Pool Code 71599
Property Code 011510	Property Name RINCON UNIT	Well Number #176E

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
F	31	27N	6W		1505'	NORTH	1850'	WEST	039

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
F	31	27N	6W		1505'	NORTH	1850'	WEST	039
Lee Code F	Producing Method Code F	Gas Connection Date ASAP	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD UL/STR Location and Description
007057	EL PASO NATURAL GAS COMPANY P.O. BOX 4990 FARMINGTON, N.M. 87499	28/6/101	G	
009018	GIANT REFINING COMPANY 5764 U.S. HIGHWAY 64 FARMINGTON, N.M. 87401	28/6/100	0	

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OCT 18 1995

IV. Produced Water

POD	POD UL/STR Location and Description
28/6/212	

OIL CON. DIV.
DIST. 3

V. Well Completion Data

Spud Date 07/27/95	Ready Date 09/20/95	TD 7600'	PSTD 7560'	Perforations 7321' - 7518'
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	
12 1/4"	9 5/8" 36#, J-55	371'	225sx "G" Cmt to surface	
8 3/4"	7" 23#&26#, K-55	7599'	1)450sx 50/50poz, 175sx "	
			2)400sx 65/35poz, 400sx	
	2 3/8" 4.7#	7543'	50/50poz, 175sx "G" cmt to	
			Pkr @ 5533' surf.	

VI. Well Test Data

Date New Oil	Gas Delivery Date ASAP	Test Date 09/04/95	Test Length 24 HRS.	Tbg. Pressure 200 psi	Csg. Pressure n/a
Choke Size Open	Oil 33	Water 3	Gas 654 MCF/D	AOP	Test Method Flowing

I hereby certify that the rules 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.

Signature:

R.L. Caine

Printed name:

R.L. Caine

Title:

Production Foreman

Date: Oct. 16, 1995

Phone: (505)632-1811

OIL CONSERVATION DIVISION

Approved by:

ORIGINAL SIGNED BY ERNIE BUSCH

Title:

DEPUTY OIL & GAS INSPECTOR, DIST. #3

Approval Date:

OCT 27 1995

If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

THIS IS AN AMENDED REPORT. CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

at all gas volumes at 15.025 PSIA at 60°.
at all oil volumes to the nearest whole barrel.

quest for allowable for a -vly drilled or deepened well must be
panied by a tabulation of the deviation tests conducted in
rdance with Rule 111.

ctions of this form must be filled out for allowable requests on
and recompleted wells.

it only sections I, II, III, IV, and the operator certifications for
ee of operator, property name, well number, transporter, or
uch changes.

erate C-104 must be filled for each pool in a multiple
ation.

erly filled out or incomplete forms may be returned to
are unapproved.

Operator's name and address

Operator's OGRID number. If you do not have one it will
be assigned and filled in by the District office.

Reason for filling code from the following table:
NW New Well
RC Recompletion
CH Change of Operator
AO Add oil/condensate transporter
CO Change oil/condensate transporter
AG Add gas transporter
CG Change gas transporter
RT Request for test allowable (include volume requested)
If for any other reason write that reason in this box.

The API number of this well

The name of the pool for this completion

The pool code for this pool

The property code for this completion

The property name (well name) for this completion

The well number for this completion

re surface location of this completion NOTE: If the
ited States government survey designates a Lot Number
r this location use that number in the "UL or lot no." box.
herwise use the OCD unit letter.

re bottom hole location of this completion

see code from the following table:

Federal
State
Fee
Jicarilla
Navajo
Ute Mountain Ute
Other Indian Tribe

producing method code from the following table:

Flowing
Pumping or other artificial lift

DA/YR that this completion was first connected to a
transporter

permit number from the District approved C-129 for
completion

A/YR of the C-129 approval for this completion

A/YR of the expiration of C-129 approval for this
ation

re oil transporter's OGRID number

and address of the transporter of the product

mber assigned to the POD from which the product
transported by this transporter. If this is a new well
mpletion and this POD has no number the district
will assign a number and write it here.

code from the following table:
Oil
Gas

22. The ULSTR location of this POD if it is different from the
well completion location and a short description of the POD
(Example: "Battery A", "Jones CPD", etc.)

23. The POD number of the storage from which water is moved
from the property. If this is a new well or recompletion and
this POD has no number the district office will assign a
number and write it here.

24. The ULSTR location of this POD if it is different from the
well completion location and a short description of the POD
(Example: "Battery A Water Tank", "Jones CPD Water
Tank", etc.)

25. MO/DA/YR drilling commenced

26. MO/DA/YR this completion was ready to produce

27. Total vertical depth of the well

28. Plugback vertical depth

29. Top and bottom perforation in this completion or casing
shoe and TD if openhole

30. Inside diameter of the well bore

31. Outside diameter of the casing and tubing

32. Depth of casing and tubing. If a casing liner show top and
bottom.

33. Number of sacks of cement used per casing string

The following test data is for an oil well it must be from a test
conducted only after the total volume of lead oil is recovered.

34. MO/DA/YR that new oil was first produced

35. MO/DA/YR that gas was first produced into a pipeline

36. MO/DA/YR that the following test was completed

37. Length in hours of the test

38. Flowing tubing pressure - oil wells
Shut-in tubing pressure - gas wells

39. Flowing casing pressure - oil wells
Shut-in casing pressure - gas wells

40. Diameter of the choke used in the test

41. Barrels of oil produced during the test

42. Barrels of water produced during the test

43. MCF of gas produced during the test

44. Gas well calculated absolute open flow in MCF/D

45. The method used to test the well:
F Flowing
P Pumping
S Swabbing
If other method please write it in.

46. The signature, printed name, and title of the person
authorized to make this report, the date this report was
signed, and the telephone number to call for questions
about this report

47. The previous operator's name, the signature, printed name,
and title of the previous operator's representative
authorized to verify that the previous operator no longer
operates this completion, and the date this report was
signed by that person