

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Box 1980, Hobbs, NM 88240

District 3
Box 1980, Hobbs, NM 88240District 3
Box 1980, Hobbs, NM 88240Operator
Union Oil Company of California

Well API No.

Address
P. O. Box 671 - Midland, TX 79702

Reason(s) for Filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompleting ☐ Oil ☐ Dry Gas ☐
Change in Operator ☐ Casinghead Gas ☐ Condensate ☐

Notes (Please explain)

C-104 submitted for record purposes with
deviation reports.If change of operator give name
and address of previous operator

I. DESCRIPTION OF WELL AND LEASE

Lease Name: Lodewick Well No. / Pool Name, including Formation: 12 Basin Fruitland Coal Kind of Lease: State, Federal or Fee: NM-02861

Location: Unit Letter: G 1675 Feet From The north line and 1500 Feet From The east line
Section 19 Township 27N Range 9W NMPM San Juan County

II. 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)
P. O. Box 4990 - Farmington, NM 87499

If well produces oil or liquids, give location of tanks: Unit: Sec: Twp: Rgn: Is gas actually connected? No When? 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 5-4-90	Date Compl. Ready to Prod. 7-15-90		Total Depth 2370'		P.B.T.D. 2365'			
Elevations (DF, RKB, RT, GR, etc.) 6505' GR 6460	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 2202'		Tubing Depth 2222'			
Perforations 2202' - 2290'					Depth Casing Shoe 2369'			

TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	226'	250
7 7/8"	4 1/2"	2369'	800
	2 3/8"	2222'	

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 100 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: Length of Test: Bbls. Condensate/MMCF: Gravity of Condensate:
45 24 hrs 0
Producing Method (Flow, pump, gas lift, etc.): Tubing pressure (SQRT-IN): Casing pressure (SQRT-IN): Choke size:
Back pr. 405 405 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 - Dir. Clerk

Typed Name: 8-1-90 Title: (915) 682-9731

Date: Telephone No.

OIL CONSERVATION DIVISION

Date Approved: SEP 04 1990

By: ORIGINAL SIGNED BY ERNIE BUSCH

Title: DEPUTY OIL & GAS INSPECTOR, DIST. #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- All sections of this form must be filled out for allowable on new and recompleting wells.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- Separate Form C-104 must be filed for each pool in multiply completed wells.