NO. OF COPIES RECEIVED			-					
DISTRIBUTION SANTA FE	NEW MEXICO OIL CO REQUEST I	Form C-104 Supersedes Old C-104 and C-110						
FILE	KLQULUT I	Effective 1-1-65						
U.S.C.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							
LAND OFFICE		4 <u>23</u>	711 769					
IRANSPORTERGAS								
OPERATOR		·	·					
Operator UNION TEXAS PETROLI	EUM TIT							
Address								
1300 Wilco Buildin Reason(s) for filing (Check proper box)	g - Midiand, lexas 7970	Other (Please explain) Change well name	and number					
New Well	Change in Transporter of: Oil Dry Ga:	frame Mill						
Recompletion	Casinghead Gas Conden	Effectives 8-1-6						
If change of ownership give name and address of previous owner	Atlantic-Richfield Compa	any - Box 1978 - Roswell,	New Mexico 88201					
II. DESCRIPTION OF WELL AND L	EASE Well No. Pool Name, Including Fo	ormation Kind of Lease	Lease No.					
Lease Name Milnesand Unit	151 Milnesand - S		or Fee Fee					
Location N 66	0 Feet From The <u>South</u> Lin	e and 1980 Feet From T	he West					
			sevelt County					
III. DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	ER OF CIL AND NATURAL GA	S Address (Give address to which approv	ed copy of this form is to be sent)					
Mobil Pipeline Company		Box 900 - Dallas, Texa	as 75221					
Name of Authorized Transporter of Cas.		Address (Give address to which approv Box 1589 - Tulsa, Okla						
Warren Petroleum Corpo	Uni: Sec. Twp. Rge.	Is gas actually connected? Whe						
give location of tanks.	N 12 8-S 34-E	Yes	November 3, 1962					
If this production is commingled with IV. COMPLETION DATA	h that from any other lease or pool,		·····					
Designate Type of Completio	n — (X) Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
			Depth Casing Shoe					
Perforations		,						
HOLE SIZE	TUBING, CASING, ANI CASING & TUBING SIZE	D CEMENTING RECORD	SACKS CEMENT					
V. TROT DATA AND REQUEST FO ONLYERS	còle for this d	ufter recovery of total volume of load oil epth or be for full 24 hours) Producing Mothod (Flow, pump, gas lij	and must be equal to or exceed top allow (t. etc.)					
Date First New Oil Hun To Tanks	Date of Test							
Longth of Toot	Tubing Pressure	Casing Pressure	Choke Size					
Actual Prod. During Teat	Cil-Bbis.	Water-Bbls.	Gas-MCF					
· · · · · · · · · · · · · · · · · · ·	<u> </u>							
CAS WELL Actual Prod. Tust-MCF/D	Langth of Test	Bbis. Condensate/MMCF	Gravity of Condensate					
i		Casing Pressure (Shut-in)	Choke Size					
Testing Kerned (sites, back pr.)	Tubing Pressure (Shut-in)							
VI. CENTIFICATE OF COMPLIAN	20	OIL CONSERVA						
I hereby curvily that the rules and	regulations of the Oil Conservation	APPROVED . 19						
	with and that the information given a best of my knowledge and belief.		Kanig					
	<i></i>	TITLE SUPERVISO	DR DISTRICE I					
	j -4	This form is to be filed in	compliance with RULE 1104.					
<u></u>	<u>Cipling my</u>	If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-						
Administrative Un	LE Coordinator							
(?	it's)	able on new and recompleted w	ells.					
August 1.		well name or number, or transpor	ter, or other such change of contention					
	4.6)	Paranto Forme C-104 mus	st be filed for each pool in multiply					

c

ieii	name	or	number,	or tran	sporte	er, or	otner	. 800	in che	uRe o		0
	Separ	ate	Forms	C-104	must	Ъe	filed	for	each	pool	in	multipl
orng	pleted	we	116.									