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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
Union Oil Company of California

Address
P.O. Box 671 - Midland, Texas 79701

Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)
Filed to obtain allowable clearance for test oil - well is to be plugged and abandoned. 50 bbls

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "A-36"	Well No. 1	Pool Name, Including Formation Wildcat	Kind of Lease State, Federal or Fee State	Lease No. K-5370
Location Unit Letter M ; 660 Feet From The South Line and 660 Feet From The West Line of Section 36 Township 7-S Range 36-E , NMPM, Roosevelt County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> General Petroleum, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 840, Hobbs, New Mexico 88240
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit M Sec. 36 Twp. 7-S Rge. 36-E	Is gas actually connected? No When

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.
Date Spudded 2-27-71	Date Compl. Ready to Prod.	Total Depth 4705'	P.B.T.D. 4633'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation San Andres - Todd	Top Oil/Gas Pay	Tubing Depth					
Perforations	Depth Casing Shoe 4705'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 11" 7-7/8"	CASING & TUBING SIZE 8-5/8" 4-1/2"	DEPTH SET 366' 4705'	SACKS CEMENT 175 500					

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 Tanks	Date of Test March - April	Producing Method (Flow, pump, gas lift, etc.) Testing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 50 (Total)	Water - Bbls.	Gas - MCF

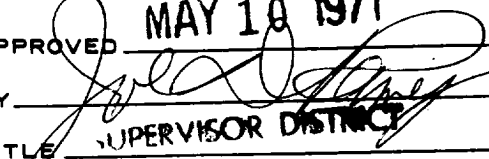
GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)
Acting District Production Superintendent
(Title)
May 6, 1971
(Date)

OIL CONSERVATION COMMISSION
MAY 10 1971
APPROVED _____, 19_____
BY 
TITLE **SUPERVISOR DISTRICT**

This form is to be filed in compliance with RULE 1104.

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 allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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MAY 1 1971
OIL CONSERVATION COMM.
HOBBS, N. M.