

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-105
Effective 1-1-65

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

AUG 11 10 05 AM '67

I.

Operator Union Texas Petroleum Corporation	
Address 1300 Wilco Building, Midland, Texas	
Reason(s) for filing (Check proper box)	
New Well ☐	Change in Transporter of: Oil ☒ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐
Recompletion ☐	
Change in Ownership ☐	Other (Please explain)

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Baskett	Well No. 2	Pool Name, including Formation Cato	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter <u>E</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>11</u> Township <u>8 - S</u> Range <u>30 E</u> , NMFM, <u>Chaves</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Mobil Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) Box 900 Dallas, Texas 75221					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Not connected	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 K	Sec. 11	Twp. 8-S	Rge. 30-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 8-25-66	Date Compl. Ready to Prod. 9-11-66	Total Depth 3618	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 4130 GL	Name of Producing Formation San Andres	Top Oil/Gas Pay 3379	Tubing Depth 3309					
Perforations 3379-3413, 3440-65	60 1/2" holes		Depth Casing Shoe 3615					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 5/8		501		300 sx - circ			
6 3/4	4 1/2		3615		300 sx TC 2420			
	2 3/8		3309					

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 9-12-66	Date of Test 9-12-66	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24	Tubing Pressure 230	Casing Pressure PKT	Choke Size 18/64
Actual Prod. During Test 265	Oil Bbls. 264	Water-Bbls. 1	Gas-MCF 129

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.

J. W. Hansen
(Signature)

Production Clerk

(Title)

August 10, 1967

OIL CONSERVATION COMMISSION

APPROVED

10

BY

TITLE

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 deviate 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.