## NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE OIL TRANSPORTER GAS OPERATOR

NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 AND AND Supersedes Old C-104 and C-110 Effective 1-1-65 AUTHORINATES TO TRANSPORT OIL AND NATURAL GAS PRORATION OFFICE Operator Union Texas Petroleum Corporation Address 1300 Wilco Bldg., Midland, Texas Reason(s) for filing (Check proper box) Other (Please explain) X Change in Transporter of: Hecompletion Oil Dry Gas Casinghead Gas Condensate Change in Ownership If change of ownership give name and address of previous owner Cato-San on R-3/66 II. DESCRIPTION OF WELL AND LEASE ndres Well No. Bool Name, Including Formation State, Federal or Fee Cato, (San Andres) Crosby Fee Location South Line and 1980 West Unit Letter 10 8-S Range 30-E Chaves Township , NMPM, Line of Section County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil 🗶 Address (Give address to which approved copy of this form is to be sent) Box 3119, Midland, Texas

Address (Give address to which approved copy of this form is to be sent) The Permian Corporation Name of Authorized Transporter of Casinghead Gas or Dry Gas Sec. Rge. Is gas actually connected? Unit Twp. If well produces oil or liquids, give location of tanks. N 10 8-S + 30-E No If this production is commingled with that from any other lease or pool, give commingling order numbers IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back | Same Res'v. Diff. Res'v. Designate Type of Completion - (X) X X Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D. November 11, 1966 November 22, 1966 3600**'** 3560**'** Top Oil/Gas Pay Name of Producing Formation Tubing Depth Pool 33081 Cato 3263' San Andres Depth Casing Shoe Perforations 3308 - 3332' and 3370 - 3416' 3596' TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 12 1/4" 8 5/8" 507' 300 sks 4 1/2" 7 7/8" 3596 450 sks 2 3/8" 3263' (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Producing Method (Flow, pump, gas lift, etc.) Date of Test November 21, 1966 November 22, 1966 Flowing Casing Pressure Choke Size Length of Test Tubing Pressure 3/4" 24 hrs. <u>50#</u> Pkr. Gas - MCF Oil-Bbls. Actual Prod. During Test Water-Bbls. 25 145 BF 120 TSTM GAS WELL Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Testing Method (pitot, back pr.) Tubing Pressure Casing Pressure Choke Size VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION APPROVED 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. 1 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 deviation tests taken on the well in accordance with RULE 111. (Signature) Production Clerk All sections of this form must be filled out completely for allowable on new and recompleted wells. (Title) November 28, 1966

(Date)

Fill out Sections I, II, III, and VI only 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.