

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

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

Form O-104
Supersedes O-103 and O-105
Effective 1-1-65

I.

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

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Crosby "17"	2	Cato (San Andres)	State, Federal or Fee Fee	
Location				
Unit Letter	J	1980 Feet From The	South	Line and
		1980 Feet From The	East	
Line of Section	17	Township	8 - S	Range
			30 E	, NMPM, Chaves
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)	
Mobil Pipe Line Company	Box 900 Dallas, Texas - 75221	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	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	Sec.
	H	17
		Twp.
		8-S
		Rge.
		30-E
Is gas actually connected?	When	
no		

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 Resrv.	Diff. Resrv.
X								
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
1-5-67	1-21-67		3450'		3424'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
4111 est. GL	San Andres		3267'		3333'			
Perforations	Depth Casing Shoe							
3267'-3302', 3328'-3345' 1 hole per ft. total (53) 3/8"holes				3450'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		516'		300 sx. - circ.			
7 7/8"	4 1/2"		3450'		300 sx. TC at 2050'			
	2 3/8"		3333'					

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 oil allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
1-22-67	1-22-67	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	-	-	-
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
92 bbls.	28	64	TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, 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.

APPROVED _____, 19

BY _____

TITLE _____

Production Clerk

(Title)

August 10, 1967

OIL CONSERVATION COMMISSION

This form is to be filed in compliance with RULE 1106.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated 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