	SANTA FE		ONSERVATION COMMISS FOR ALLOWABLE AND	Form C -104 Supersedes Ol! C-104 and C-11 Effective 1-1-75	
	U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS OPERATOR PROBATION OFFICE	AUTHORIZATION TO TRAI	NSPORT OIL AND NATUR 11 AUG 21 11 50 11	6xis 167	
1.	Operator	Operator			
	Union Texas Petroleum Corporation				
		Midland, Texas 79701			
	Reason(s) for filing (Check proper box)		Other (Please explain)		
	New Well X Recompletion	Change in Transporter of: Oil Dry Gas			
	Change in Ownership	Casinghead Gas Conden	F		
	If change of ownership give name				
	and address of previous owner				
11.	DESCRIPTION OF WELL AND I	LEASE		(
	Lease Name Baxter Federal	Well No. Pool Name, Including Fo 5 Cato (San An		se Lease No. ^{al o} xfxx NMO 142233	
	Location	I		I I I I I I I I I I I I I I I	
	Unit LetterJ;198	O Feet From The south Line	e and Feet From	Theeast	
		nship 8-S Range	30-е , ммрм,	Chaves County	
	Line of Section 0 100	inship coordination in the second sec	,,,,,		
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S Address (Give address to which appr	oved copy of this form is to be sent)	
Mohil Pipe Line Co. P. O. Box 900 Dalla				as, Texas	
	Name of Authorized Transporter of Cas	Inghead Gas 🔄 or Dry Gas 🧮	Address (Give address to which appr	oved copy of this form is to be sent)	
	None	Unit Sec. Twp. Rge.	Is gas actually connected?	hen	
	If well produces oil or liquids, give location of tanks.	F 17 8-S 30-E	No		
	If this production is commingled with	h that from any other lease or pool,	give commingling order number:		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completic		X		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	7-15-67 Elevations (DF, RKB, RT, GR, etc.)	8-4-67 Name of Producing Formation	3359' Top Oil/Gas Pay	3320' Tubing Depth	
	4071 est GL	San Andres	3252	3264	
	Perforations			Depth Casing Shoe	
	3252 - 3288' 36 3/8" holes 3359 TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	12-1/4"	8-5/8''	538	<u>300 sx - circ.</u>	
	7=7/8"	5-1/2"	3359	225 sx TC @ 2010	
1					
. V .	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load o	il and must be equal to or exceed top allow	
i	OIL WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas	lift, etc.)	
1	8-4-67	8-20-67	Pump 2" x 1-1/4" x	16'	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	24 hrs. Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF	
		14	38	TSTM	
	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	
			OIL CONSERV	ATION COMMISSION	
, 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		
	A		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 allow able on new and recompleted wells.		
	Fred albert				
		ature)			
•	Well Tester	itle)			
•	8-21-67		Fill out only Sections I	II III, and VI for changes of owner	
. .		ate)	well name or number, or transp	orter, or other such change of condition ust be filed for each pool in multipl	
;			appendice rolling		