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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 79702
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)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name Tom "36" State Well No. 2 Pool Name, including Formation Undesignated (Tomahawk San Andres)
Kind of Lease State, Federal or Fee State Lease No. L-5120
Location
Unit Letter H ; 1980 Feet From The North Line and 660 Feet From The East
Line of Section 36 Township 7-South Range 31 East , NMPM, Chaves County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Koch Oil Company Address (Give address to which approved copy of this form is to be sent)
P. O. Box 1558 - Breckenridge, Texas 76024
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
None 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 H Sec. 36 Twp. 7-S Rge. 31-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 7-17-79 Date Compl. Ready to Prod. 8-5-79 Total Depth 4,305' P.B.T.D. 4,260'
Elevations (DF, RKB, RT, GR, etc.) 4,438' GR Name of Producing Formation San Andres Top Oil/Gas Pay 4,197' Tubing Depth 4,145'
Perforations 4,197' to 4,217' Depth Casing Shoe 4,305'
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12-1/4" 8-5/8" CD 1,654' 750 sx Cirul. to Surf.
7-7/8" 5-1/2" CD 4,305' 400 sx
2-3/8" CD 4,145'

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 8-4-79 Date of Test 8-5-79 Producing Method (Flow, pump, gas lift, etc.) Swab-Test
Length of Test 24 hours Tubing Pressure 0 Casing Pressure 0 Choke Size -
Actual Prod. During Test 272 Oil-Bbls. 240 Water-Bbls. 32 Gas-MCF 104

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.
L. F. Thompson
District Operations Manager
August 9, 1979
OIL CONSERVATION COMMISSION
APPROVED AUG 13 1979
BY John W. Purney
TITLE Geologist
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.