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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF			

NEW MEXICO OIL CONSERVATION COMMIS IN REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

}	FILE	REQUEST	OR ALLOWABLE	Effective 1-1-65					
ł	U.S.G.S.	AUTHORIZATION TO TRA	AND	0.45					
	LAND OFFICE	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS					
	OIL								
	TRANSPORTER GAS								
	OPERATOR								
I.	PRORATION OFFICE								
	Operator								
Union Texas Petroleum Corporation									
	1300 Wilco Building - Midland, Texas 79701								
	Reason(s) for filing (Check proper box)		Other (Please explain)						
	New Well	Change in Transporter of:		CLASI Intellegen amount feets					
	Recompletion	Oil Dry Gas		GAS MUST NOW WE					
	Change in Ownership	Casinghead Gas Conden		KEPTION TO B-48%					
				from U.S. J. S.					
	If change of ownership give name		J						
	and address of previous owner								
11.	DESCRIPTION OF WELL AND I	LEASE							
	Lease Name	Well No. Pool Name, Including Fo		1 2					
	Miller 33 Federal	2 Tom-Tom (San A	ndres) State, Fede	eral or Fee Federal NMO46153A					
	Location	0 11	1000	T 4					
	Unit Letter; 198	O Feet From The South Line	e andFeet Fro.	m The East					
	22	7 2	1 Ch						
	Line of Section 33 Tow	mship 7 Range 3	, NMPM, Cn	aves County					
	PROCESS A MICHAEL OF MP ANOPONO	CER OF OUT AND NATURAL CA	c						
111.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which app	proved copy of this form is to be sent)					
	Phillips Petroleum Com		4001 Penbrook - Odes						
	Name of Authorized Transporter of Cas	tinghead Gas or Dry Gas	Address (Give address to which app	proved copy of this form is to be sent)					
	None								
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When					
	give location of tanks.	J 33 7/ 31	No						
	If this production is commingled wit	h that from any other lease or pool.	give commingling order number:						
IV.	COMPLETION DATA								
	Designate Type of Completion	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.					
			X						
	Date Spudded 12-29-81	Date Compl. Ready to Prod. 2-20-82	Total Depth	P.B.T.D. 3910'					
			Top Cil/Gas Pay	Tubing Depth					
	Elevations (DF, RKB, RT, GR, etc.) 4290 GR	Name of Producing Formation San Andres	3837	3905					
	Perforations			Depth Casing Shoe					
	3837 -	3890		3910					
		TUBING, CASING, AND	CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
	12-1/4"	8-5/8" Csg.	1320	763 sx.					
	7-7/8"	5-1/2" Csg.		825 sx.					
		2-3/8" Thg.							
			<u> </u>						
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load	oil and must be equal to or exceed top allow-					
	OIL WELL	able for this de	epth or be for full 24 hours) Producing Method (Flow, pump, gas						
	Date First New Oil Run To Tanks 2-21-82	Date of Test 3-19-82	Pump - 1½" x 86" x	J.					
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size					
	24 hrs.								
	Actual Prod. During Test	Oil-Bbis.	Water-Bbis.	Gas - MCF					
•	24 hrs. 252 bbls.	95	157	37					
			<u> </u>						
	GAS WELL								
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensgte/MMCF	Gravity of Condensate					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size					
VI	. CERTIFICATE OF COMPLIAN	CE	OIL CONSER	VATION COMMISSION 1982, 19					
			MAND 25	1982					
	I hereby certify that the rules and	regulations of the Oil Conservation	il						
	Commission have been complied to	with and that the information given e best of my knowledge and belief.	II BY	BY OFIGNAL SIGNED BY					
above is true and complete to the best of my mentage and		I JOHRY SEXTON							
		TITLE SUPR.							
	Puland Atchlan		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened						
Production Services Supr. (Title) March 23, 1982		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.							
						(Date)		Separate Forms C-104 must be filed for each pool in multiply completed wells.	