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| DISTRIBUTION | | | |
| SANTA FE | | | |
| FILE | | | - |
| U.S.G.S. | | | |
| LAND OFFICE | | | 1 |
| IRANSPORTER | OIL | | |
| | GAS | | |
| OPERATOR | | | |

NEW MEXICO OIL CONSERVATION COMMISS

Form C-104

| į | SANTA FE | REQUEST I | FOR ALLOWABLE | Supersedes Old C-104 and C-110 Effective 1-1-55 | | | |
|---|--|---|--|---|--|--|--|
| | FILE U.S.G.S. | ALITHODIZATION TO TOA | AND NSPORT OIL AND NATURAL (| | | | |
| | LAND OFFICE | AUTHORIZATION TO TRA | NSFORT OIL AND NATURAL | :43 | | | |
| | IRANSPORTER OIL | | | | | | |
| | GAS OPERATOR | | | | | | |
| | PRORATION OFFICE | | | | | | |
| 4. | Operator Union Texas Pe | Union Texas Petroleum Corporation | | | | | |
| | Address | | | | | | |
| | 1300 Wilco Bldg., Midland, Texas 79701 | | | | | | |
| | Reason(s) for filing (Check proper box) | | Other (Please explain) | | | | |
| | New Well | Change in Transporter of: | Request to move | approx. 1000 bbls. test | | | |
| | Change in Ownership | Recompletion Oil Dry Gas Oil prior to potential test. Change in Ownership Casinghead Gas Condensate | | | | | |
| | | | | | | | |
| | If change of ownership give name and address of previous owner | | | | | | |
| ** | . DESCRIPTION OF WELL AND LEASE | | | | | | |
| Lease Name Well No. Pool Name, Including Formation Kind of Lease | | | | | | | |
| | Miller Federal 33 4. | // 3 Tom-Tom (San An | dres) State, Federa | der Fee Federal NMO46153A | | | |
| | Location H 1980 | Feet From TheLine | 660 | East | | | |
| | | Unit Letter;Feet From The Line and Feet From The | | | | | |
| | Line of Section 33 | nship 7-S Range 3 | 31-E , NMPM, Cha | Ves County | | | |
| 111 | DESIGNATION OF TRANSPORT | FROFOIL AND NATURAL GA | S | | | | |
| | Name of Authorized Transporter of Oil | or Condensate | Address (Give address to which appro | | | | |
| | Phillips Petroleum Comp | · · · · · · · · · · · · · · · · · · · | 4001 Penbrook, Odessa, | | | | |
| | Name of Authorized Transporter of Cas | inghead Gas or Dry Gas | Address (Give address to which appro | ved copy of this form is to be sent) | | | |
| | If well produces oil or liquids, | Unit Sec. Twp. F.ge. | Is gas actually connected? Wh | en | | | |
| | give location of tanks. | J 33 7S 31E | No | Nama | | | |
| ••• | If this production is commingled wit | h that from any other lease or pool, | give commingling order number: | None | | | |
| IV. | COMPLETION DATA | Oil Well Gas Well | New Well Workover Deepen | Plug Back Same Restv. Diff. Restv. | | | |
| | Designate Type of Completio | | | | | | |
| | Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | | | |
| | Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Cil/Gas Pay | Tubing Depth | | | |
| | | | | | | | |
| | Perforations | | | Depth Casing Shoe | | | |
| | TUBING, CASING, AND CEMENTING RECORD | | | | | | |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | | |
| | | | | | | | |
| | | | | | | | |
| | | _ | <u> </u> | | | | |
| V. | TEST DATA AND REQUEST FO | OR ALLOWABLE (Test must be a able for this de | fter recovery of total volume of load oil pth or be for full 24 hows) | and must be equal to or exceed top allow- | | | |
| | Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas l | ift, etc.) | | | |
| | Length of Test | Tubing Pressure | Casing Pressure | Choke Size | | | |
| | Langin of 14st | , ability , resource | | | | | |
| | Actual Prod. During Test | Oil-Bbls. | Water - Bbis. | Gas - MCF | | | |
| | | | | | | | |
| | 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 COMPLIAN | CE | OIL CONSERV | ATION COMMISSION | | | |
| | | | APPROVED 0018 1982 . 19 | | | | |
| I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given | | ORIGINAL SIGNED BY | | | | | |
| | above is true and complete to the best of my knowledge and belief. | | BY BRR (SEC U.S. | | | | |
| | | | TITLE | | | | |
| | P.1. 6 | Al. Ho | This form is to be filed in compliance with RULE 1104. | | | | |
| | Production Service | atwey / | 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- | | | | |
| | | _ | | | | | |
| | October 4, 1982 ^{Tille} | | able on new and recompleted wells. | | | | |
| | Fill out only Sections I. II. III, and VI for changes well name or number, or transporter, or other such change of | | | II. III, and VI for changes of owner, rier, or other such change of condition. | | | |
| | 2 | | The second section of the second section is a second section of the second section sec | | | | |

Separate Forms C-104 must be filed for each pool in multiply completed wells.