

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

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

|                     |            |
|---------------------|------------|
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| SANTA FE            |            |
| FILE                |            |
| U.S.G.S.            |            |
| LAND OFFICE         |            |
| TRANSPORTER         | OIL<br>GAS |
| OPERATOR            |            |
| PRODUCTION OFFICE   |            |

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): Initial delivery of casinghead gas to Cities Service Oil Company at 10:00 A.M. December 21, 1979.

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

|                                                                                                                                                                                                                               |                      |                                                              |                                                        |                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------------------------------------------|--------------------------------------------------------|----------------------------|
| Lease Name<br><b>Tom "36" State</b>                                                                                                                                                                                           | Well No.<br><b>1</b> | Pool Name, including Formation<br><b>Tomahawk San Andres</b> | Kind of Lease<br>State, Federal or Fee<br><b>State</b> | Lease No.<br><b>L-5120</b> |
| Location<br>Unit Letter <u>A</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u><br>Line of Section <u>36</u> Township <u>7 South</u> Range <u>31 East</u> , NMPM, <u>Chaves</u> County |                      |                                                              |                                                        |                            |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|                                                                                                                                                               |                                                                                                                               |                              |                    |                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|------------------------------|--------------------|---------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/><br><b>Koch Oil Company</b>                   | Address (Give address to which approved copy of this form is to be sent)<br><b>P. O. Box 1558 - Breckenridge, Texas 76024</b> |                              |                    |                     |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/><br><b>Cities Service Oil Company</b> | Address (Give address to which approved copy of this form is to be sent)<br><b>Bartlesville, Oklahoma 74003</b>               |                              |                    |                     |
| If well produces oil or liquids, give location of tanks.                                                                                                      | Unit<br><b>A</b>                                                                                                              | Sec.<br><b>36</b>            | Twp.<br><b>7-S</b> | Rge.<br><b>31-E</b> |
| Is gas actually connected? <b>Yes</b>                                                                                                                         |                                                                                                                               | When<br><b>Dec. 21, 1979</b> |                    |                     |

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                                | Date Compl. Ready to Prod.  |          | Total Depth     |          |        | P.B.T.D.          |             |              |
| Elevations (DF, RKB, RT, GR, etc.)          | Name of Producing Formation |          | Top Oil/Gas Pay |          |        | Tubing Depth      |             |              |
| Perforations                                |                             |          |                 |          |        | Depth Casing Shoe |             |              |
| <b>TUBING, CASING, AND CEMENTING RECORD</b> |                             |          |                 |          |        |                   |             |              |
| HOLE SIZE                                   | CASING & TUBING SIZE        |          | DEPTH SET       |          |        | SACKS CEMENT      |             |              |
|                                             |                             |          |                 |          |        |                   |             |              |
|                                             |                             |          |                 |          |        |                   |             |              |
|                                             |                             |          |                 |          |        |                   |             |              |

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 | Date of Test    | Producing Method (Flow, pump, gas lift, etc.) |            |
| Length of Test                  | Tubing Pressure | Casing Pressure                               | Choke Size |
| Actual Prod. During Test        | Oil-Bbls.       | Water-Bbls.                                   | Gas-MCF    |

GAS WELL

|                                  |                           |                           |                       |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D          | Length of Test            | Bbls. Condensate/MMCF     | 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.

R. T. Shurtleff  
Signature)  
R. T. Shurtleff  
District Production Superintendent

May 10, 1980

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Jerry Sexton  
TITLE Dist 1, Supv.

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 and recompleted wells.

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.