J .	NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPERATOR PRORATION OFFICE Operator Union Oil Company Address P. O. Box 671 Reason(s) for filing (Check proper box) New Well	REQUEST F AUTHORIZATION TO TRAN of California Midland, Texas 79701	DNSERVATION COMMISSIC FOR ALLOWABLE AND NSPORT OIL AND NATURAL GA	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
	Recompletion Change in Ownership If change of ownership give name and address of previous owner DESCRIPTION OF WELL AND I	Oil Dry Gas Casinghead Gas Condens	sate X	Lease No.
:		J La Rica Morrov D Feet From The South Line nship 19	State, Federal State, Federal e and760Feet From Ti	cr Fee Federal NM-10474
III.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil The Permian Corporation Name of Authorized Transporter of Cas EI Paso Natural Gas Com Continental Oil Company If well produces oil or liquids, give location of tanks.	or Condensate X inchead Gas or Dry Gas X inphany	Address (Give address to which approve P. O. Box 1183 - Hou Address (Give address to which approve P. O. Box 1492 - E1 P. O. Box 1267 - Pon	uston, Texas 77001
	If this production is commingled wit COMPLETION DATA Designate Type of Completio Date Spudded Elevations (DF, RKB, RT, GR, etc.)	Oil Well Gas Well	give commingling order number: New Well Workover Deepen 	Plug Back Same Res ⁴ v. Diff. Res ⁴ v. P.B.T.D. Tubing Depth Depth Casing Shoe
	Perforations HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	THE DATA AND DEOUEST E	OR ALLOWARLE (Test must be a	fter recovery of total volume of load oil a	and must be equal to or exceed top allow-
v.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow- able for this depth or be for full 24 hours) OIL WELL Producing Method (Flow, pump, gas lift, etc.)			
	Date First New Oil Run To Tanks Length of Test	Date of Test Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test GAS WELL	Oll - Bbls.		
	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.	I. 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.		OIL CONSERVATION COMMISSION APPROVED	
	February 21, 1975		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	

i completed wells.