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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 79701**  
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 <b>Midway State</b>	Well No. <b>5</b>	Pool Name, including Formation <b>Lovington Devonian</b>	Kind of Lease State, Federal or Fee <b>State</b>	Lease No. <b>K-4513 K-6237</b>
Location Unit Letter <b>K</b> ; <b>2310</b> Feet From The <b>South</b> Line and <b>2310</b> Feet From The <b>West</b> Line of Section <b>12</b> Township <b>17 South</b> Range <b>36 East</b> , NMPM, <b>Lea</b> 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"/> <b>Texas-New Mexico Pipe Line Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>P. O. Box 1510 - Midland, Texas 79701</b>			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>Phillips Petroleum Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>Phillips Building - Odessa, Texas 79760</b>			
If well produces oil or liquids, give location of tanks.	Unit <b>F</b>	Sec. <b>12</b>	Twp. <b>17-S</b>	Rge. <b>36-E</b>
Is gas actually connected? <b>Yes</b>		When <b>April 23, 1975</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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded <b>January 19, 1975</b>	Date Compl. Ready to Prod. <b>April 18, 1975</b>		Total Depth <b>11,610'</b>		P.B.T.D. <b>11,609'</b>			
Elevations (DF, RKB, RT, GR, etc.) <b>3825' GR.</b>	Name of Producing Formation <b>Devonian</b>		Top Oil/Gas Pay <b>11,494'</b>		Tubing Depth <b>6,009'</b>			
Perforations <b>11,568' to 11,595'</b>					Depth Casing Shoe <b>11,610'</b>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<b>15"</b>	<b>11-3/4" OD Casing</b>		<b>452'</b>		<b>350 sx Circul.</b>			
<b>11"</b>	<b>8-5/8" OD "</b>		<b>4,500'</b>		<b>400 sx</b>			
<b>7-7/8"</b>	<b>5-1/2" OD "</b>		<b>11,610'</b>		<b>400 sx</b>			
	<b>2-7/8" OD Tubing</b>		<b>6,009'</b>					

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 allowable for this depth or be for full 24 hours)


Date First New Oil Run To Tanks <b>April 23, 1975</b>	Date of Test <b>April 26, 1975</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Pumping</b>	
Length of Test <b>24 Hours</b>	Tubing Pressure <b>-</b>	Casing Pressure <b>-</b>	Choke Size <b>-</b>
Actual Prod. During Test	Oil-Bbls. <b>179</b>	Water-Bbls. <b>4</b>	Gas-MCF <b>18</b>

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.

  
**John Tyler**  
(Signature)  
**District Production Superintendent**  
(Title)  
**May 1, 1975**  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY   
TITLE \_\_\_\_\_

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.

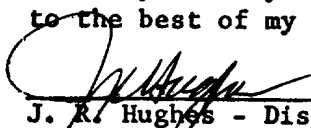
Separate Form C-104 must be filed for each pool in multiply completed wells.

OPERATOR: Union Oil Company of California  
 LEASE: Midway State  
 WELL NO.: 5  
 LOCATION: Section 12, Unit Letter K,  
 Township 17 South, Range 36 East,  
 Lea County, New Mexico

DEVIATION TESTS


<u>DEPTH</u>	<u>DEGREES</u>	<u>DEPTH</u>	<u>DEGREES</u>
215'	1/4	8,610'	1-1/4
340'	1/2	8,765'	1-1/2
450'	1/2	8,956'	3
954'	1/2	9,050'	3-1/2
1,450'	3/4	9,143'	3-1/2
1,954'	1/2	9,267'	4
2,440'	3/4	9,325'	3-3/4
2,965'	1/2	9,393'	3-1/2
3,520'	1/2	9,465'	4-1/4
3,850'	1/4	9,582'	4-3/4
4,136'	-0-	9,610'	4-3/4
4,325'	1/2	9,635'	4-1/4
4,820'	1	9,720'	4-1/2
5,135'	3/4	9,815'	4-1/2
5,448'	1	9,920'	5
5,762'	1-1/4	10,014'	4-3/4
6,107'	1-1/2	10,095'	4-1/2
6,380'	1-3/4	10,194'	4-1/4
6,702'	1-3/4	10,350'	3-3/4
7,086'	1-3/4	10,385'	3-3/4
7,423'	1-3/4	10,485'	4-1/4
7,736'	1-3/4	10,576'	4-3/4
7,955'	2	10,730'	4-1/2
8,290'	1-3/4	11,350'	6
8,486'	1-1/4	11,610'	6-1/2

I hereby certify that all deviation tests set forth above are true and correct to the best of my knowledge.

  
 J. R. Hughes - District Drilling Supt.

for: Union Oil Company of California

Subscribed and sworn to before me, a Notary Public in and for Midland County, Texas, this 1st day of May, 1975.

  
 My Commission Expires 6-1-75