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U.S.G.S.		
LAND OFFICE		
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

Operator Union Oil Company of California	
Address P. O. Box 671 - Midland, Texas 79702	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

OTHER (Please explain) **GAS MUST NOT BE PRODUCED AFTER 4/11/79 UNDER AN EXCEPTION TO R-4070 IS OBTAINED.**

If change of ownership give name and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Pipeline "16" State	Well No. 1	Pool Name, Including Formation Undesignated (Quail Ridge-Bone Springs)	Kind of Lease State, Federal or Fee State	Lease No. L-2949
Location				
Unit Letter G ; 1980 Feet From The North Line and 1980 Feet From The East				
Line of Section 16 Township 19 South Range 34 East , NMPM, Lea 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183 - Houston, Texas 77001	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 16
	Twp. 19-S	Rge. 34-E
	Is gas actually connected? No	
	When	

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 Jan. 27, 1979	Date Compl. Ready to Prod. Mar. 24, 1979		Total Depth 13,606'		P.E.T.D. 10,258'			
Elevations (DF, RKB, RT, GR, etc.) 3791' GR.	Name of Producing Formation Bone Springs		Top Oil/Gas Pay 10,133'		Tubing Depth 10,103'			
Perforations 10,133' to 10,149'						Depth Casing Shoe 10,313'		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8" OD		501'		500 sx Circulated			
11"	8-5/8" OD		5,187'		1800 sx DV Tool @ 1797' Cir.			
7-7/8"	5-1/2" OD		10,313'		500 sx			
	2-7/8" OD Tubing		10,103'					

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)

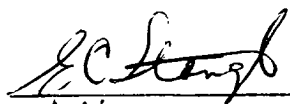
Date First New Oil Run To Tanks Mar. 26, 1979	Date of Test Mar. 31, 1979	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 Hours	Tubing Pressure 110	Casing Pressure Packer	Choke Size 30/64"
Actual Prod. During Test 396 Bbls.	Oil-Bbls. 355	Water-Bbls. 41	Gas-MCF 443.7

GAS WELL

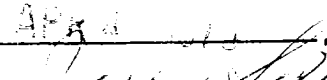
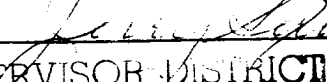
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.


E. C. Stangle
Acting (Signature)
District Production Superintendent
(Title)
April 2, 1979
(Date)

OIL CONSERVATION COMMISSION

APPROVED  1979
BY 
TITLE **SUPERVISOR-DISTRICT**

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 Forms C-104 must be filed for each pool in multiply

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APR 2 1979
OIL CONSERVATION COMM.
ROSS, N. AL