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	GAS	
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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)	Other (Please explain)
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"/>

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Pipeline Deep Unit Federal	Well No. 2	Pool Name, Including Formation Undesignated (Quail Ridge - Morrow Gas)	Kind of Lease State, Federal or Fee Federal	Lease No. NM-3622
Location Unit Letter <u>G</u> ; <u>760</u> Feet From The <u>North</u> Line and <u>2050</u> Feet From The <u>East</u> Line of Section <u>18</u> Township <u>19 South</u> Range <u>34 East</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	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"/>	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. 18	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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 3-28-79	Date Compl. Ready to Prod. 6-1-79	Total Depth 13,501'	P.B.T.D. 13,480'					
Elevations (DF, RKB, RT, GR, etc.) 3,739' GR	Name of Producing Formation Morrow	Top Oil/Gas Pay 12,852'	Tubing Depth 13,318'					
Perforations 13,388' to 13,402' 1/2" Jet 30 holes			Depth Casing Shoe 13,501'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8" OD	503'	450 Sacks, Circul.					
11"	8-5/8" OD	5,240'	1800 Sacks					
7-7/8"	5-1/2" OD	13,501'	1100 Sacks					
	2-3/8" OD	13,318'						

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)

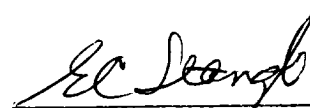
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

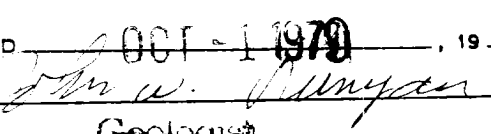
Actual Prod. Test-MCF/D 742.6	Length of Test 3-1/2 hrs.	Bbls. Condensate/MMCF 37	Gravity of Condensate 53.2 @ 60 Deg.
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 5000	Casing Pressure (Shut-in) Packer	Choke Size 22/64"

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
(Signature)
Acting District Production Superintendent
(Title)
June 20, 1979
(Date)

OIL CONSERVATION COMMISSION

APPROVED  , 19 1979
BY J. W. Dunbar
TITLE Geologist

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 tested wells.