

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Union Oil Company of California		Well API No. 30-025-308400
Address: P. O. Box 671 - Midland, TX 79702		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
Filed for record purposes only with inclination report.		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Maduro Federal Unit	Well No. 4	Pool Name, including Formation Gem Morrow Gas	9-1-90 R-92-71	Kind of Lease State, Federal or Fee	Lease No. NM-14794
Location Unit Letter B : 460 Feet From The north Line and 1980 Feet From The east Line Section 29 Township 19-S Range 33-E , NMPM , Lea County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Unknown	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Unknown	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	Sec.	Tw.	Rgs.	Is gas actually connected?	When ?
					No	Negotiating Contract

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
		X	X					
Date Spudded 12-28-89	Date Compl. Ready to Prod. 4-19-90		Total Depth 13,750'		P.B.T.D. CIBP @ 13,250' w/20'			
Elevations (DF, RKB, RT, GR, etc.) 3600.6' GR	Name of Producing Formation MORROW		Top Oil/Gas Pay 13,052'		Tubing Depth 12,966'			
Perforations 13,052-13,062' (Upper Morrow)					Depth Casing Shut 13,750'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		465'		400			
12 1/4"	9 5/8"		4,943'		2,405'			
8 3/4"	5 1/2"		13,750'		1,460			

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 Tank	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 1325	Length of Test 4 hours	Bbls. Condensate/MMCF 8	Gravity of Condensate 55.4°
Testing Method (pucl, back pr.) Back pressure	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) 0	Choke Size 10.5/64

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Charlotte Beeson
Signature
Charlotte Beeson - Drilling Clerk
Printed Name
Date **May 7, 1990** Telephone No. **(915) 682-9731**

OIL CONSERVATION DIVISION

Date Approved **MAY 14 1990**

By **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT ENGINEER

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

RECEIVED

MAY 10 1990

OCD
HOBBS OFFICE