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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

DEC 23 10 28 AM '65
OFFICE O. C. 6

Operator Union Texas Petroleum Corporation	
Address 1300 Wilco Building, Midland, Texas 79704	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" 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 Britt	Well No. 12	Pool Name, Including Formation Monument (Grayburg San Andres)	Kind of Lease State, Federal or Fee Federal
Location			
Unit Letter C ; 330 Feet From The North Line and 2281 Feet From The West			
Line of Section 7 , Township 20-S Range 37-E , NMFM, 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"/> Shell Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) Box 1910, Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, Okla.					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 7	Twp. 20-S	Rge. 37-E	Is gas actually connected? Yes	When 12-16-65

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 Rest.v.	Diff. Rest.v.
					X		X		X
Date Spudded 7-29-54	Date Compl. Ready to Prod. 12-16-65		Total Depth 5713'		P.B.T.D. 3725'				
Pool (Grayburg San Andres) Monument	Name of Producing Formation Grayburg San Andres		Top Oil/Gas Pay 3684'		Tubing Depth 3684'				
Perforations 3684-3690					Depth Casing Shoe 5712'				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
18"		13-3/8"		612		450			
11"		8-5/8"		3298		1900			
7-7/8"		5-1/2"		5712		500			
		2-3/8" Tubing		3684					

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.)

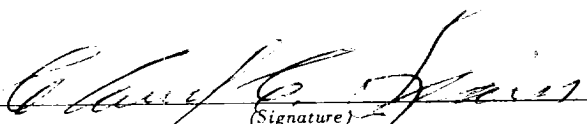
Date First New Oil Run To Tanks 12-16-65	Date of Test 12-16-65	Producing Method (Flow: pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 77 BO	Oil - Bbls. 77	Water - Bbls. 78	Gas - MCF GOR 579

GAS WELL

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


(Signature)
DISTRICT CLERK
(Title)
December 20, 1965
(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 Sections I, II, III, and VI only 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 completed wells.