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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 Estoril Producing Corporation		
Address 1120 Vaughn Building, Midland, Texas 79701		
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 Union Federal	Well No. 1	Pool Name, Including Formation <i>R-6169</i> Undesignated Morrow	Kind of Lease State, Federal or Fee Federal	Lease No. LC064194
Location Unit Letter <u>J</u> ; <u>1980</u> Feet From The <u>south</u> Line and <u>1980</u> Feet From The <u>east</u> Line of Section <u>9</u> Township <u>20S</u> Range <u>34E</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) Permian Corporation P.O. Box 1183, Houston, TX 77001				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Llano, Inc. P.O. Drawer 1320, Hobbs, NM 88240				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? When
					Yes October 8, 1979

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'tv.	Diff. Res'tv.
			X	X					
Date Spudded 3-24-79	Date Compl. Ready to Prod. 6-29-79	Total Depth 13,600'		P.B.T.D. 13,559'					
Elevations (DF, RKB, RT, GR, etc., 3636.5 GR	Name of Producing Formation Morrow	Top Oil/Gas Pay 13,326		Tubing Depth 13,163'					
Perforations 13,326-13,332 & 13,454-13,461' (1-.41 wes jet mangum/ft				Depth Casing Shoe pkr 13,129'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17-1/2"	13-3/8"		853		725 sx A-2 & A-7 CCL				
12-1/4"	9-5/8"		5215		1300 sx BJ lite & 2 3/4 Cl.				
8-3/4"	5-1/2"		13,600		1510 sx BJ lite & Cl. H				
8-3/4"	2-3/8" tbg		13,163						

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 1.4	Length of Test 8 hrs	Bbls. Condensate/MMCF 21.6	Gravity of Condensate 51 at 60°
Testing Method (pitot, back pr.) back pressure	Tubing Pressure (Shut-in) 600-2190	Casing Pressure (Shut-in) pkf	Choke Size 12/64"

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.

Lesley Allison  
(Signature)  
President  
(Title)  
October 17, 1979  
(Date)

OIL CONSERVATION COMMISSION OCT 23 1979	
APPROVED	19
BY	<u>Supervisor District</u>
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 Forms C-104 must be filed for each pool in multiply completed wells.

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**OCT 19 1979**

**O.C.D. HOBBS, OFFICE**