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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

30-025-27280

I. Operator
Sonat Exploration Co.
Address
P.O. Box 7626 Shreveport, La. 71137-7626
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name and address of previous owner
Franks Petroleum Inc., P.O. Box 7665 Shreveport, La. 71137-7665

II. DESCRIPTION OF WELL AND LEASE

Lease Name Union Federal	Well No. 1	Pool Name, Including Formation Hat Mesa Morrow	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter A : 660 Feet From The North Line and 660 Feet From The East Line of Section 9 Township 21S Range 32E , NMPM, Lea 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"/> Permian Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 561, Artesia, N.M. 88201			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Llano Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box Drawer 1320, Hobbs N.M. 88240			
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 9	Twp. 21S	Rge. 32E
Is gas actually connected?		When Yes April 29, 1982		

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 7/2/81	Date Compl. Ready to Prod. 10/31/81	Total Depth 14385		P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3739 GR	Name of Producing Formation Morrow	Top Oil/Gas Pay 14,216		Tubing Depth 14,160					
Perforations 14216' - 14217', 14274' - 14282'				Depth Casing Shoe 14,385					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
15	11 3/4	456		320 Class "C"					
11	8 5/8	5264		3150 Lite & "C"					
7 7/8	5 1/2	14385		580 Class "H" & 50/50 P					

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)

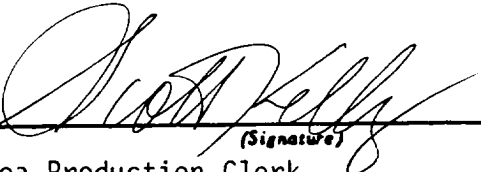
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 476	Length of Test 5	Bble. Condensate/MMCF 4	Gravity of Condensate 51.6
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 3610	Casing Pressure (Shut-in) Packer	Choke Size 10/64

VI. 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.


(Signature)
Area Production Clerk
(Title)
9/29/89
(Date)

OIL CONSERVATION DIVISION
OCT 12 1989
APPROVED _____, 19____
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
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.