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U.S.G.S.	
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 UNION TEXAS PETROLEUM CORPORATION	
Address 1300 Wilco Building, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	
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"/>
Other (Please explain) ask 2nd oil transporter	
If change of ownership give name and address of previous owner	

I. DESCRIPTION OF WELL AND LEASE

Lease Name Langlie-Jal Unit	Well No. 12	Pool Name, Including Formation Langlie-Mattix (Queen)	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter G, 1977 Feet From The East Line and 2310 Feet From The North				
Line of Section 31 Township 24-S Range 37-E, NMPM, Lea County				

I. 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 Corp. Texas-New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) Box 1910, Midland, Texas 79701 Box 1510, Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) Box 1942, El Paso, Texas 79910	
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 5
	Twp. 25-S	Rge. 37-E
	Is gas actually connected? Yes	When 4-1-49

If this production is commingled with that from any other lease or pool, give commingling order number:

II. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X			X			X	
Date Spudded 6-1-57	Date Compl. Ready to Prod. 5-16-74		Total Depth 3545'			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) 3249' DF	Name of Producing Formation Seven-Rivers (Queen)		Top Oil/Gas Pay 3395'			Tubing Depth 3445'		
Perforations With 1 JSPF 3395-3400', 3408-12', 3416-18', 3436-38', 3444-51', (Total 25 shots)						Depth Casing Shoes 3470'		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
12 1/4"	8 5/8"		177'			150 Sx.		
7 7/8"	5 1/2"		3470'			250 Sx.		
	2 3/8" (Tubing)		3445'					

III. TEST DATA AND REQUEST FOR ALLOWABLE (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 5-16-74	Date of Test 5-27-74	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure -0-	Casing Pressure -0-	Choke Size ---
Actual Prod. During Test	Oil-Bbls. 30	Water-Bbls. 36	Gas-MCF TSTM

GAS WELL

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

IV. 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.

Stanley A. Post  
(Signature)  
Gas Measurement Analyst  
(Title)  
August 1, 1974  
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 5 1974, 19  
BY Orig. Signed by  
Joe D. Ramey  
TITLE Dist. I, Supv.

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.