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	SANTA FE		CONSERVATION COMMIS	Form C-104 Supersedes Old C-104 and C-111	
	FILE	REQUEST	AND	Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL GA	43	
	LAND OFFICE				
	TRANSPORTER OIL	-			
	GAS OPERATOR				
I.	PRORATION OFFICE	-			
•••	Operator				
	UNION TEXAS PETROLE	CORPORATION			
		g, Midland, Texas 79701			
	Reason(s) for filing (Check proper box		Other (Please explain)	1. 1	
	New Well	Change in Transporter of:		t'a stat	
	Recompletion Change in Ownership	Oil Dry G Casinghead Gas Conde	as Line and the second se		
	If change of ownership give name and address of previous owner	change of ownership give name d address of previous owner			
11.	DESCRIPTION OF WELL AND	Well No. Fool Name, Including F	Formation Kind of Lease	Lease No.	
	Langlie-Jal Unit 72 Langlie-Mattix (Queen) State, Federal cr Fee Patented Location Unit Letter C ; 660 Feet From The North Line and 2310 Feet From The West				
Line of Section 8 Township 25-S Range 37-E , NMPM, Lea				County	
	Line of Section D 10				
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
	Name of Authorized Transporter of Oll Shell Pipeline Corpora	ation	Box 1910, Midland, Texa	s 79701	
	Texas-New Mexico Pipel Name of Authorized Transporter of Car	singhead Gas 🔀 or Dry Gas 🗌	Box 1910, Midland, Texa Box 1510, Midland, Texa Address (Give address to which approve	s 19101 ed copy of this form is to be sent)	
	El Paso Natural Gas (Box 1492, El Paso, Tex	as 79910	
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When	1	
	give location of tanks.	Give location of tarks. <u>G 5 25-S 37-E Yes</u> Unknown			
IV	If this production is commingled wi COMPLETION DATA	this production is commingled with that from any other lease or pool, give commingling order number:			
	Designate Type of Completio	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Date Spudded 11-13-37	3-20-74	3476'	Open Hole	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	3190' RT	Seven-Rivers (Queen)	3030'	3402 ' Depth Casing Shoe	
	Perforations				
TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	NA	13"	266'	900 Sx.	
	NA NA	<u> </u>	2767'		
	NA	2" (Tubing)	3402 '		
V. 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 able for this depth or be for full 24 hours)				nd must be equal to or exceed top allow-	
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift		
	4-18-74	5-12-74	Pump		
	Length of Teat	Tubing Pressure	Casing Pressure	Choke Size	
	24 hrs.	0	0 Water-Bbls.	Gas-MCF	
	Actual Prod. During Test	Oll-Bble.	3	TSTM	
	GAS WELL			Gravity of Condensate	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVATION COMMISSION APPROVED , 19, 19 BY GUM G. MUNYAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA		
	a state have been complied	regulations of the Oil Conservation with and that the information given			
	above is true and complete to th	e best of my knowledge and belief.			
				TITLE	
			This form is to be filed in compliance with RULE 1104.		
	Stanley A. Jost		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 allow- able 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.		
	d ^{(Sign}	lature)			
	Gas Measurement Ana (T	alyst			
	August 7, 1974				
	(D	ate)			

Separate Forms C-104 must be filed for each pool in multiply completed wells.