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| 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) | 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 Carlson "A" | Well No. 1 | Pool Name, Including Formation Blinebry | Kind of Lease State, Federal or Fee Federal | Lease No. NM 0766 |
| Location | | | | |
| Unit Letter J | 2310 | Feet From The South | Line and 2310 | Feet From The East |
| Line of Section 25 | Township 25-S | Range 37-E | NMPM, Lea | County |

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|--|-----------|------------|--|--------------|-----------------------------------|----------------|
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | | | | | | |
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> | | | Address (Give address to which approved copy of this form is to be sent) | | | |
| Texas- New Mexico Pipeline Company | | | Box 1510, Midland, Texas 79701 | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | | | Address (Give address to which approved copy of this form is to be sent) | | | |
| El Paso Natural Gas Company | | | Box 1492 El Paso, Texas | | | |
| If well produces oil or liquids, give location of tanks. | Unit J | Sec. 25 | Twp. 25-S | Rge. 37-E | Is gas actually connected? Yes | When 7-1-66 |

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 X | Gas Well | New Well | Workover | Deepen | Plug Back X | Same Res'v. X | Diff. Res'v. X |
| Date Spudded 2-20-59 | Date Comp. Ready to Prod. 8-26-74 | Total Depth 6,954' | | P.B.T.D. 6,200' | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3065' GL | Name of Producing Formation Blinebry | Top Oil/Gas Pay 5,236' | | Tubing Depth 5,297' | | | | |
| Perforations 1 JSPF 5236-41'; 5249-56'; 5265-69'; 5271 -73'; 5295-98'; 5317-19'; 5321-25'; 5342-45'; 5381-85'; 5393-95'; (Total 46 Holes) | | | | Depth Casing Shoe ----- | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 17 1/2" | 13-3/8" | | 573' | | 450 sx. | | | |
| 12 1/4" | 9-5/8" | | 3,273' | | 1,400 sx. | | | |
| N.A. | 7" | | 6,953' | | 200 sx. | | | |

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|---|------------------------|--|---------------------|
| 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 9-2-74 | Date of Test 9-4-74 | Producing Method (Flow, pump, gas lift, etc.) Pumping | |
| Length of Test 24 | Tubing Pressure 0 | Casing Pressure ---- | Choke Size ----- |
| Actual Prod. During Test | Oil-Bbls. 197 | Water-Bbls. 50 | Gas-MCF 1000 |

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| GAS WELL | | | |
| 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 |

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|--|--|--|--|
| VI. CERTIFICATE OF COMPLIANCE | | OIL CONSERVATION COMMISSION | |
| 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. | | APPROVED _____, 1974 | |
| BY _____ | | BY _____ | |
| TITLE _____ | | 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. | | | |

Stanley A. Post
(Signature)
Gas Measurement Analyst
(Title)
9-26-74
(Date)