NEW M ICO OIL CONSERVATION COMMIS N
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

MAR 5 PM 2 25

Midland, Texas (Place) 3-4-63 (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Union Texas Petroleum Corporation (Company or Operator) Langlie "D" (Lease), Well No. 1, in SE ¼ SW ¼,

H (Unit Letter), Sec. 14, T. 25-S, R. 37-E, NMPM., Justis (Blinebry) Pool

Lea County. Date Spudded 12-6-62 Date Drilling Completed 1-28-63

Elevation 3105 (Est.) Total Depth 8190 PBTD 6707'

Top Oil/Gas Pay 5394' Name of Prod. Form. Blinebry

PRODUCING INTERVAL -

Perforations 5394' - 5515'

Open Hole _____ Depth Casing Shoe 6702' Depth Tubing 5547'

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 85.56 bbls. oil, 31.59 bbls water in 24 hrs, 0 min. Choke Size 10/64"

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 2000 gal. acid & 20,000# Sandfrac

Casing Press. 400# Tubing Press. 500# Date first new oil run to tanks 3-2-63

Oil Transporter Texas New Mexico Pipe Line Company

Gas Transporter El Paso Natural Gas Company

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N X	O	P

330' FNL & 2310' FWL

Tubing, Casing and Cementing Record

Size	Feet	Sax
13 3/8"	935'	600
7"	6702'	1700

Remarks: Request Temporarily approval for off lease storage.

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved _____, 19____

OIL CONSERVATION COMMISSION

By: Joe D. Ramey

Title _____

Union Texas Petroleum Corporation (Company or Operator)

By: L. H. Foster (Signature)

Title District Superintendent

Send Communications regarding well to:

Name L. H. Foster

Address Box 1859 - Midland, Texas