NO. OF COPIES REC	NO. OF COPIES RECEIVED				
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SANTA FE					
FILE					
U.S.G.S.					
LAND OFFICE					
IRANSPORTER	OIL				
	GAS				
OPERATOR					

(Date)

	SANTA FE FILE	REQUEST	FOR ALLOWABLE OF 6. C. C.	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
	U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS	AUTHORIZATION TO TRA	ANSPORT OF AND NATURAL	GAS		
1.	OPERATOR PRORATION OFFICE Operator					
	Union Oil Company of California					
	P. O. Box 671 - Midlan Reason(s) for filing (Check proper box		Other (Please explain) Temporary change	to furnish drilling rig		
	New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Go Casinghead Gas Conde	\overline{X} fuel to Sharp Dr enough fuel to d	lg. Co., who will take on rill a well. El Paso Nat- remains the main trans-		
	If change of ownership give name and address of previous owner		porter or gas ir	om this well.		
II.	DESCRIPTION OF WELL AND Lease Name		une, Including Formation	Kind of Lease		
	Red Hills Unit	K-1459 1 Red	Hills Wolfcamp	State, Federal or Fee State		
	Unit Letter 0; 3	Feet From The South Lir	ne and 2310 Feet From	The East		
	Line of Section 32 , To	wnship 25 South Range 3	33 East , NMPM, L	ea County		
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	Address (Give address to which appro	oved copy of this form is to be sent)		
	Name of Authorized Transporter of Ca	singhead Gas or Dry Gas 🔀	Address (Give address to which appro	oved copy of this form is to be sent)		
	Sharp Drilling Company	(Temporary Sale)	P. O. Box 1271 - Midla Is gas actually connected?			
	If well produces oil or liquids, give location of tanks.	0 32 25-S 33-E	Yes	June 24, 1966		
	If this production is commingled with COMPLETION DATA	th that from any other lease or pool,	give commingling order number:			
	Designate Type of Completion — (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.					
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Poo:	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Perforations			Depth Casing Shoe		
	TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
		· · · · · · · · · · · · · · · · · · ·				
V.	TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks One of Test One					
	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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size		
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.			, 19			
	Complete to the	/ continue of any substitution of the state	TITLE	27		
	() 111.1h			compliance with RULE 1104.		
J. F. Wilkinson (Signature)			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			
	District Office Manager (Title)		tests taken on the well in acco	rdance with RULE 111. ust be filled out completely for allow-		
7	July 25, 1966		able on new and recompleted w			

Fill out Sections I, II, III, and VI only 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.