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| DISTRIBUTION | |
| SANTA FE | |
| FILE | |
| 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 checked="" type="checkbox"/> | Change in Transporter of: |
| Recompletion <input 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) | |
| If change of ownership give name and address of previous owner | |

| | | | | |
|--------------------------------|------------------|--|--|-----------------------|
| DESCRIPTION OF WELL AND LEASE | | | | |
| Lease Name Langlie-Jal Unit | Well No. 100 | Pool Name, Including Formation Langlie-Mattix (Queen) | Kind of Lease State, Federal or Fee State | Lease No. |
| Location | | | | |
| Unit Letter L | 1426 | Feet From The South | Line and 1300 | Feet From The West |
| Line of Section 32 | Township 24-S | Range 37-E | NMPM, | Lea County |

| | | | | |
|--|--|------------|-----------------------------------|-----------------|
| DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | | | | |
| Name of Authorized Transporter of Oil, Gas or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | |
| Shell Pipeline Corporation Texas-New Mexico Pipeline | Box 1910 - Midland, Tx 79701 Box 1510 - Midland, Tx 79701 | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" 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 79910 | | | |
| If well produces oil or liquids, give location of tanks. | Unit J | Sec. 32 | Twp. 24-S | Rge. 37-E |
| | | | Is gas actually connected? Yes | When 9-28-82 |

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

| | | | | | | | | |
|---|---|-------------------------|----------------------|----------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well XX | Gas Well | New Well XX | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded 7-9-82 | Date Compl. Ready to Prod. 8-1-82 | Total Depth 3700 | P.B.T.D. 3681 | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3234.6 GR | Name of Producing Formation Seven-Rivers Queen | Top Oil/Gas Pay 3142 | Tubing Depth 3537 | | | | | |
| Perforations 3142 - 3619 | | | Depth Casing Shoe | | | | | |

| | | | |
|--------------------------------------|--------------------------------|------------------|------------------------|
| TUBING, CASING, AND CEMENTING RECORD | | | |
| HOLE SIZE 12-1/4" | CASING & TUBING SIZE 8-5/8" | DEPTH SET 820 | SACKS CEMENT 600 SX |
| 7-7/8" | 5-1/2" | 3692 | 700 SX |
| | 2-7/8" | 3537 | |


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 8-3-82 | Date of Test 9-28-82 | Producing Method (Flow, pump, gas lift, etc.) Pumping | |
| Length of Test 24 | Tubing Pressure --- | Casing Pressure --- | Choke Size --- |
| Actual Prod. During Test | Oil-Bbls. 61 | Water-Bbls. 71 | Gas-MCF 83 |

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| 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 |

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.


Robert H. Heston
Production Services Supervisor

November 11, 1982

| | |
|--|--------------------|
| OIL CONSERVATION COMMISSION NOV 18 1982 | |
| APPROVED | ORIGINAL SIGNED BY |
| BY | JERRY SEXTON |
| TITLE | DISTRICT 1 SUPR. |

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 entries on this form must be filled out completely for allowable on newly drilled and recompleted wells.

RECEIVED

NOV 12 1982

G.C.D.
HARRIS