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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
**REQUEST FOR ALLOWABLE
AND HOBBS OFFICE O. C. C.**
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
Jul 28 2 49 PM '67

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator TEXACO Inc.

Address P. O. Box 728 - Hobbs, New Mexico

Reason(s) for filing (Check proper box)

New Well <input type="checkbox"/>	Change in Transporter of:	Other (Please explain)
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/>	*Filed to show change in Transporter from The Permian Corporation to: Famariss Oil & Refining Company.
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	
	Dry 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 No. <u>1</u>	Well No. <u>1</u>	Pool Name, including Formation <u>South Salt Lake Morrow</u>	Kind of Lease <u>State, Federal or Fee</u>
Location			
Unit Letter <u>0</u>	<u>660</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>East</u>		
Line of Section <u>31</u>	Township <u>20-S</u>	Range <u>33-E</u>	NMPM, <u>Lea</u> County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>*Famariss Oil & Refining Company</u>	<u>P. O. Box 980 - Hobbs, New Mexico 88240</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>TEXACO Inc. (TO SOUTHERN UNION)</u>	<u>P. O. Box 728 - Hobbs, New Mexico 88240</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<u>0 31 20-S 33-E YES Unknown</u>

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	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.				
Pool	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 (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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbbls.	Water-Bbbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. 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.

E. H. Scott (Signature)
District Accountant (Title)
August 1, 1967 (Date)

OIL CONSERVATION COMMISSION
JUL 31 1967

APPROVED _____, 19____
BY Gold
TITLE SUPERVISOR DISTRICT

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 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.

1. Kill well with 9 lb. per gal. Ken-X mud and pull 2" tubing. (BHP= 5503 psi)
2. Mill and retrieve Baker Model "FA" packer (set in 7-inch casing at 10,200') and Baker Model "D" packer (set in 5-inch liner at 13,200')
3. Run approximately 13,600' of 2-1/2" N-80 tubing with Baker 5-inch bridging plug and Baker 5-inch Full Bore Retrievable Cementer.
4. Fracture Treatment (as recommended by Dowell)
 - A. Set bridging plug at 13,620' and packer, at 13,500 and fracture perms. 13,515' to 13,602' with:
 - 500 gals Mud Acid
 - 5000 gals Waterfrac - 60
 - 5000 gals Waterfrac - 60 w/5000 lbs. 40/60 Sand
 - 20,000 gals Waterfrac - 60 w/10,000 lbs. 20/40 walnut hulls
 - B. Set bridging plug at 13,435' and packer at 13,360' and fracture perms. 13,378' to 13,425' with the same treatment as Step A.
 - C. Set bridging plug at 13,335' and packer at 13,270' and fracture perms. 13,288' to 13,324' with:
 - 500 gals Mud Acid
 - 5000 gals Waterfrac - 60
 - 5000 gals Waterfrac - 60 w/5000 lbs. 40/60 sand
 - 10,000 gals Waterfrac - 60 w/5000 lbs. 20/40 walnut hulls.

NOTES: 1. All of Waterfrac - 60 will contain J-84 fluid loss additive and G-2, foaming agent.
 2. Estimated injection rate 6-1/2 BPM.
 3. Estimated surface injection pressure 9000 psi.
 4. Estimated friction loss, 1000 psi in 2-1/2" tubing.
 5. All stages to be flushed with Ken-X (hole volume only) to maintain equal pressures and hole control.

5. Pull 2-1/2" tubing and re-run original 2" tubing to 13,260' with Baker 5" Model "R" packer and holdown at 13,200'.
6. Swab, recover load oil, test, return well to production.