

DISTRIBUTION	
ANTA FE	
ILE	
S.G.S.	
AND 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

I.

Operator TEXACO Inc.	
Address P.O. Box 728 Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Request or Transport Permit <input type="checkbox"/>
Recompletion <input checked="" type="checkbox"/>	Change in Ownership <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Other (Please explain) Request Temporary approval to surface commingle until formal approval is granted.

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name J.R. Phillips	6	Monument Abo	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter E	660	West	1897	Feet From Top North
Line of Section 6	20-S	37-E	Lea	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
Texas-New Mexico Pipeline Company	P.O. Box 1510 Midland, Texas 79701		
Name of Authorized Transporter of Gas <input checked="" type="checkbox"/> or Oil <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
Warren Petroleum Company	Lovington, New Mexico		
If well produces oil or liquids, give location of tanks.	D 6 20-S 37-E	Is Gas Being Transported? Yes	When 4-17-77

If this production is commingled with that of another well, give commingling order number:

PC-28

IV. COMPLETION DATA

Designate Type of Completion - (N) <input checked="" type="checkbox"/> (D) <input type="checkbox"/> (S) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (E) <input type="checkbox"/> (F) <input type="checkbox"/> (G) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input checked="" type="checkbox"/> (O) <input type="checkbox"/> (P) <input type="checkbox"/> (Q) <input type="checkbox"/> (R) <input type="checkbox"/> (S) <input type="checkbox"/> (T) <input type="checkbox"/> (U) <input type="checkbox"/> (V) <input type="checkbox"/> (W) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)	Date Spudded 8-1-49	Time Spudded 4-17-77	Depth 7760'	Plug Back 7680'	Same Res'v. X	Diff. Res'v. X
Elevations (DF, RKB, RT, GR, etc.) 3576' (DF)	Name of Formation Abo	Depth 7108'	Tubing Depth -			
Perforations Perforated 5 1/2" OD Cas w/1-JSPF @ 7108', 26', 60', 68', 7208', 74', 7300', 14', & 7326'.	Depth Casing Shoe 7759'					
TUBING, CASING, AND CEMENTING RECORD						
HOLE SIZE 17 1/2"	CASING & TUBING SIZE 13 3/8"	DEPTH SET 322'	SACKS CEMENT 325			
11"	8 5/8"	2792'	2300			
7 3/8"	5 1/2"	7759'	1250			

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 four 24 hours

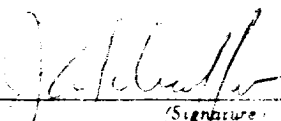
Date First New Oil Run To Tanks 4-7-77	Date of Test 4-17-77	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 Hrs	Tubing Pressure 280#	Casing Pressure -	Choke Size 20/64"
Actual Prod. During Test 188	Water Cut 244	Gas - MCF 46	

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	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.



Assistant District Superintendent

(Title)

4-19-77

(Date)

OIL CONSERVATION COMMISSION

APPROVED **APR 20 1977**, 19

By **John W. Runyan**

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.

RECEIVED

APR 20 1977

OIL CONSERVATION COMM.
HOBBS, N. M.