

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

RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

I. **Transporter**
TEXACO Inc.
Address
P. O. Box 728 - Hobbs, New Mexico
Reason(s) for filing (check proper box)
Change in Transporter of:
Oil ☐ **Dry Gas** ☒ **Other (Please explain)**
This form filed to show Dry Gas transporter.
Condensate ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
A. H. Blinebry NCT-1	16	Tubb (GAS)	Federal
Location			State, Federal or Fee
Mail Letter J 660 Feet From The West Line and 2022 Feet From The South			
Line of Section 33 Township 22-S Range 38-E, NMPM, Lea 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)
Texas-New Mexico Pipe Line Company	P. O. Box 1510 - Midland, Texas
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)
Northern Natural Gas Company	P. O. Box 2376 - Hobbs, New Mexico
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When.
E 33 22-S 38-E	YES February 19, 1965

If this production is commingled with that from any other lease or pool, give commingling order number: PC-21

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	NO	GAS	NEW	NEW	NEW	NEW	- - -	- - -
Date drilled	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
March 20, 1964	April 27, 1964	6300'	6293'					
Perforations	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforate 2 7/8" Casing with one jet shot at 6151', 6157', 6169', 6179', 6192', 6200', and 6208'.	Tubb	6151'	6300'					
			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	1350'	600 Sx.
7 7/8"	2 7/8"	6298'	1300 Sx.
7 7/8"	2 7/8"	6300'	1300 Sx.

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 Prod. To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Amount Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Amount of Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
2882	24 Hours	NONE	- - -
Producing Method (flow, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Back Pressure	1200	- - -	16/64"

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.

H. D. Raymond
Assistant District Superintendent
(Signature)
(Title)

March 9, 1965.
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19_____
BY John D. Raymond
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 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 a multiply completed wells.