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

N MEXICO OIL CONSERVATION COMMISSION (Form C-104)
 Santa Fe, New Mexico Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit. **TEXACO Inc. - P.O. Box 728 Hobbs, New Mexico** March 16, 1964
 (Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

TEXACO Inc. State of New MEXICO "CR", Well No. 1, in NW $\frac{1}{4}$ NW $\frac{1}{4}$,
 (Company or Operator) (Lease)
D, Sec. 32, T. 19-S, R. 32-E, NMPM, Lusk (Strawn) Pool
 Unit Letter

LEA County. Date Spudded Jan. 8, 1964 Date Drilling Completed March 3, 1964

Please indicate location:

D	C	B	A
X			
E	F	G	H
L	K	J	I
M	N	O	P

Elevation 3558' (D. F.) Total Depth 11,500' PBD 11,450'

Top Oil/Gas Pay 11,304' Name of Prod. Form. Strawn

PRODUCING INTERVAL - 11,304' to 11,324'

Perforations _____
 Open Hole NONE Depth Casing Shoe 11,495' Depth Tubing 11,400'

OIL WELL TEST -
 Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____ Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 443 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size 11/64" Choke

GAS WELL TEST -
 Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

(FOOTAGE)
Tubing, Casing and Cementing Record

Size	Feet	Sax
11 3/4"	910	600
8 5/8"	3884	650
4 1/2"	11478	300
2 3/8"	11387	NONE

Method of Testing (pitot, back pressure, etc.): _____
 Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____
 Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): see remarks

Casing Press. - - Tubing Press. 800 Date first new oil run to tanks March 10, 1964

Oil Transporter McWood Corporation Trucks - Midland, Texas

Gas Transporter To be connected later.

Remarks: Perforate 4 1/2" O. D. Casing with one jet shot per foot from 11,304' to 11,324'. Acidize with 500 gals LSTNE.

I hereby certify that the information given above is true and complete to the best of my knowledge.
 Approved _____, 19_____

By: Joe T. Hare
 Title _____

TEXACO Inc.
 (Company or Operator)
 By: H. D. Raymond
 (Signature) H. D. Raymond

Title Assistant District Superintendent
 Send Communications regarding well to:
 Name H. D. Raymond
 P. O. Box 728 - Hobbs, New Mexico