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FILE NO.	
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

Nov 16 2 54 PM '65

I. OPERATOR

Operator: **TEXACO Inc.**

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

Reason(s) for filing (Check proper box):
 New Well: Change in Transporter of:
 Recompletion: Oil: Dry Gas:
 Change in Ownership: Casinghead Gas: Condensate:

Other (Please explain): **To show Gas Transporter.**

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name L. R. Kershaw	Well No. 8	Pool Name, including Formation Eumont (GAS)	Kind of Lease State, Federal or Fee
Location Unit Letter D ; 660 Feet From The North Line and 990 Feet From The West			
Line of Section 13 , Township 20-S , Range 37-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"/> NONE	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 6666 - Odessa, Texas
If well produces oil or liquids, give location of tanks.	Unit: D , Sec.: 13 , Twp.: 20-S , Rge.: 37-E
Is gas actually connected? YES	When: November 1, 1965

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 <input type="checkbox"/> NO	Gas Well <input checked="" type="checkbox"/> GAS	New Well <input type="checkbox"/> NEW	Workover <input type="checkbox"/> NEW	Deepen <input type="checkbox"/> NEW	Plug Back <input type="checkbox"/> NEW	Same Res'tv. <input type="checkbox"/> NEW	Diff. Res'tv. <input type="checkbox"/> NEW
Date Spudded July 19, 1963	Date Compl. Ready to Prod. November 1, 1965	Total Depth 6180'	P.B.T.D. 4006'					
Pool Eumont	Name of Producing Formation Penrose	Top Oil/Gas Pay 3626'	Tubing Depth 4006'					
Perforations Perforate 2 7/8" Casing with 1 jet shot at 3626', 3650' & 3688'						Depth Casing Shoe 4006'		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	9 5/8"		1410'		750 Sx.			
8 3/4"	2 7/8"		4006'		750 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)

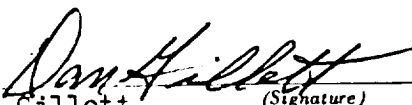
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1359	Length of Test 24 Hours	Bbls. Condensate/MMCF DRY	Gravity of Condensate - - -
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure 750	Casing Pressure - - -	Choke Size 32/64"

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.


Dan Gillett (Signature)
 Assistant District Superintendent
 (Title)
 November 4, 1965
 (Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY _____

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 well name or number, or transporter, or other such change of
 Separate Forms C-104 must be filed for each pool in multiply completed wells.