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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  
**TEXAS PACIFIC OILCO., INC.**  
Address  
**P. O. Box 1069 - Hobbs, New Mexico 88340**

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)  
**OPERATION ON WELL NOT BE  
 RECOMPLETION 7/12/72  
 UNDER PRODUCTION TO R-4070  
 IS CONTINUED.**

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>State "A" A/c-1</b>	Well No. <b>112</b>	Pool Name, including Formation <b>Yates 7 Bvrs Queen</b>	Kind of Lease State, Federal or Fee <b>State</b>	Lease No. <b>SM 2A</b>
Location Unit Letter <b>J</b> ; <b>2210</b> Feet From The <b>South</b> Line and <b>1650</b> Feet From The <b>East</b> Line of Section <b>11</b> Township <b>23-S</b> Range <b>36-E</b> , NMPM, <b>Lee</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>The Permian Corp. (Trucks)</b>	Address (Give address to which approved copy of this form is to be sent) <b>P. O. Box 1195 - Amarillo, Texas 79001</b>			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit <b>Q</b>	Sec. <b>21</b>	Twp. <b>23</b>	Page. <b>36</b>
	Is gas actually connected? <b>Y</b>		When	

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 checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded <b>6-20-72</b>	Date Compl. Ready to Prod. <b>7-3-72</b>		Total Depth <b>3437'</b>		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) <b>3428' GP</b>	Name of Producing Formation <b>Yates 7 Bvrs Queen</b>		Top Oil/Gas Pay <b>3327'</b>		Tubing Depth <b>3318'</b>		Depth Casing Shoe	
Perforations <b>3327, 28, 29, 30, 31'</b>								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<b>12-1/4"</b>	<b>8-5/8"</b>		<b>402'</b>		<b>275</b>			
<b>7-7/8"</b>	<b>5-1/2"</b>		<b>3437'</b>		<b>225</b>			

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 <b>7-3-72</b>	Date of Test <b>7-10-72</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Pumping</b>	
Length of Test <b>12 hr</b>	Tubing Pressure <b>325</b>	Casing Pressure <b>520</b>	Choke Size <b>0"</b>
Actual Prod. During Test <b>150</b>	Oil-Bbls. <b>90</b>	Water-Bbls. <b>60</b>	Gas-MCF <b>137M</b>

GAS WELL

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

Original Signed by  
**C. R. Tilley**

(Signature)

**Area Production Foreman**

(Title)

**7-11-72**

OIL CONSERVATION COMMISSION

APPROVED **JUL 15 1972**, 19

BY **John Runyan**

TITLE **Area Dist**

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 allow-

DEVIATION RECORD

<u>Footage</u>	<u>Slope</u>	<u>Footage</u>	<u>Slope</u>
402	3/4	2621	1-1/2
854	1/2	2885	2
945	1/2	3277	2-
1216	3/4	3437	2
1709	3/4	3467	2
2179	3/4		

I hereby certify the information given above is true and complete to the best of my knowledge.

TEXAS PACIFIC OIL CO., INC.

C. R. Tilley  
C. R. Tilley  
Area Production Foreman

Subscribed and sworn to before me this 12<sup>th</sup> day of July, 1972.

Melba L. Seago  
Melba L. Seago  
Notary Public  
Lea County, New Mexico

My commission expires January 30, 19 75.

FILED  
JUL 13 1972  
J. C. [unclear]  
[unclear]