

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator TEXACO EXPLORATION & PRODUCTION INC	Well API No. 30 025 25622
Address BOX 730, HOBBS NM 88240	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name
and address of previous operator

Cancel Sand Dunes BS

II. DESCRIPTION OF WELL AND LEASE

Lease Name SDE 18 FEDERAL	Well No. 1	Pool Name, Including Formation WILDCAT-DELEWARE	R 9843 3/1/93	Kind of Lease State, Federal or Fee FEDERAL	Lease No. NM-18848
Location Unit Letter C, 990 Feet From The N Line and 1980 Feet From The W Line Section 18 Township 23S Range 32E, NMPM, LEA County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil TEXACO T & T	<input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) BOX 60628, MIDLAND, TX 79711-0628				
Name of Authorized Transporter of Casinghead Gas PHILLIPS 66	<input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 990G PLAZA OFFICE BLDG., BARTLESVILLE, OK 74004				
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 18	Twp. 23S	Rge. 32E	Is gas actually connected? NO	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 X	Gas Well	New Well	Workover	Deepen	Plug Back X	Same Res'v	Diff Res'v X
Date Spudded 11-07-79	Date Compl. Ready to Prod. 11-21-92		Total Depth 9300'		P.B.T.D. 8500'			
Elevations (DF, RKB, RT, GR, etc.) 3555' GR	Name of Producing Formation DELEWARE		Top Oil/Gas Pay 8363		Tubing Depth 8439'			
Perforations 8363-8438'					Depth Casing Shoe 9300'			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15	11 3/4	966	900
10 5/8	8 5/8	4650	2250
7 7/8	5 1/2	9300	2150

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 Tank 11/24/92	Date of Test 12/03/92	Producing Method (Flow, pump, gas lift, etc.) PM	
Length of Test 24 HR	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 70	Water - Bbls. 60	Gas - MCF 21

GAS WELL

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

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation
Division have been complied with and that the information given above
is true and complete to the best of my knowledge and belief.

Signature *L.W. Johnson*
L.W. JOHNSON ENGR ASST
Printed Name
12-03-92
Date
Title
393-7191
Telephone No.

OIL CONSERVATION DIVISION

DEC 10 '92

Date Approved

By ORIGINAL SIGNED BY JERRY CENTON
DISTRICT I SUPERVISOR

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

3A Sand Dunes BS