

Operator Texaco Exploration and Production Inc		Well No. 30-015-27068
Address P. O. Box 730 Hobbs, New Mexico 88240-2528		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Completion <input 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 _____

II. DESCRIPTION OF WELL AND LEASE	
Lease Name DOW "B" 33 FEDERAL	Well No. 1 Pool Name, including Formation WILDCAT MORROW Kind of Lease State, Federal or Fee FEDERAL Lease No. LC-029420-B
Location Unit Letter J : 2180 Feet From The SOUTH Line and 1980 Feet From The EAST Line Section 33 Township 17-S Range 31-E , NMPM , EDDY 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"/> TTTI	Address (Give address to which approved copy of this form is to be sent) P.O. Box 6196 MIDLAND, TEXAS 79711
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> CONOCO INC.	Address (Give address to which approved copy of this form is to be sent) 10 DESTA DRIVE 100 WEST MIDLAND, TEXAS 79705
If well produces oil or liquids, give location of tanks.	Unit J Sec. 33 Twp. 17S Rge. 31E Is gas actually connected? NO When ?

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

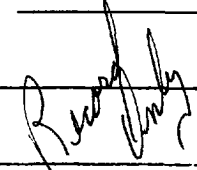
IV. COMPLETION DATA	
Designate Type of Completion - (X)	Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v <input type="checkbox"/> Diff Res'v <input type="checkbox"/>
Date Spudded 8-5-92	Date Compl. Ready to Prod. 10-4-92 Total Depth 12050' P.B.T.D. 11900'
Elevations (DF, RKB, RT, GR, etc.) GR-3760', KB-3777'	Name of Producing Formation MORROW Top Oil/Gas Pay 11614' Tubing Depth 11495'
Correlations 11614-11618, 11718-11722, 11742-11758, 11770-11777 W/4 JSPF 168 HLES	Depth Casing Shoe 12050'
TUBING, CASING AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE
14 3/4	11 3/4
11	8 5/8
7 7/8	5 1/2
DEPTH SET 653' SACKS CEMENT 400 SX, TOC @ 100' BY TS	
12050' 1770 SX. (CIRC)	
2300 SX, TOC @ 4000'	

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

GAS WELL	
Actual Prod. Test - MCF/D 1580 MCF	Length of Test 20 HRS
Testing Method (pilot, back pr.) FLOWING	Tubing Pressure (Shut-in)
	Casing Pressure (Shut-in)
	Choke Size 11/64

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  MONTE C. DUNCAN	ENGR. ASST.
Printed Name 11-20-92	Title 505-393-7191
Date	Telephone No.

OIL CONSERVATION DIVISION

Date Approved _____
By  _____
Title _____