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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

RECEIVED

APR 30 1992

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Texaco Exploration and Production Inc.	Well API No. 30-015-26935
Address P.O. Box 730 Hobbs, New Mexico 88240	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <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 DD 25 Federal	Well No. 3	Pool Name, Including Formation Dagger Draw Upper Penn North	Kind of Lease State, Federal or Fee	Lease No. NM-58024
Location Unit Letter A : 130 Feet From The North Line and 660 Feet From The East Line Section 25 Township 19-S Range 24-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"/> Amoco Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 702068 Tulsa, Oklahoma 74170-2068	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Feagan Gathering Company	Address (Give address to which approved copy of this form is to be sent) 4000 North Big Spring, Ste 305; Midland, TX	
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 24
	Twp. 19-S	Rge. 24-E
	Is gas actually connected? Yes	When? 4-27-92
		79705

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

CTB-326

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 3-27-92	Date Compl. Ready to Prod. 4-27-92		Total Depth 7996		P.B.T.D. 7947			
Elevations (DF, RKB, RT, GR, etc.) GR-3580, KB-3598	Name of Producing Formation Canyon		Top Oil/Gas Pay 7668		Tubing Depth 7502			
Perforations 7668-70, 7679, 7702-05, 7710-13, 7734-46, 7758-60, 7766-68, 7778-92, 7806-18, 7828-41, 7847-51, 7856, 7861, 7867-70, 4 JSPF, 292					Depth Casing Shoe 7996			
TUBING, CASING AND CEMENTING RECORD Holes								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 3/4	9 5/8		1100		700 sx (circ)			
8 3/4	7		7996		1450 sx (circ)			
					D.V. Tool @ 4488			

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.)

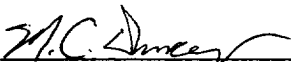
Date First New Oil Run To Tank 4-27-92	Date of Test 4-27-92	Producing Method (Flow, pump, gas lift, etc.) Submersible Pump - 361 stage, 150 HP	
Length of Test 10.5 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 19767 GOR	Oil - Bbls. 43	Water - Bbls. 259	Gas - MCF 850

GAS WELL Calculated 24
hour rate

Actual Prod. Test - MCF/D	Length of Test 98	Bbls. Condensate/MMCF 592	Gravity of Condensate 1943 (19826 GOR)
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
M.C. Duncan
Printed Name
4-28-92
Date
Engineer's Assistant
Title
393-7191
Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 30 1992

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

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.