

OIL CONSERVATION DIVISION

Drawer DD Artesia, N.M.

DISTRICT OFFICE II

January thru July 1990

NO. 2094 N

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE April 27, 1990

PURPOSE ALLOWABLE ASSIGNMENT - NEW OIL

Effective April 1, 1990 an allowable for a non-marginal (N187) well is hereby assigned to Texaco Producing Inc., Getty 24 Federal #2-M-24-22-31 in the Livingston Ridge Delaware Pool.

L - F

MP - P

MW/san

Texaco Prod. Inc.

TTF

OIL CONSERVATION DIVISION


DISTRICT SUPERVISOR

RECEIVED

OIL CONSERVATION DIVISION

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

APR 27 '90

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Texaco Producing Inc.		Well API No. 30-015-26287	ARTESIA OFFICE
Address P. O. Box 730 Hobbs, NM 88240			
Reason(s) for Filing (Check proper box) 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"/>			
Other (Please explain) CASINGHEAD GAS MUST NOT BE FLARED AFTER 6/2/92 UNLESS AN EXCEPTION FROM THE B.L.M. IS OBTAINED			
If change of operator give name and address of previous operator			

II. DESCRIPTION OF WELL AND LEASE

Lease Name Getty 24 Federal	Well No. 2	Pool Name, Including Formation Livingston Ridge Delaware	Kind of Lease State, Federal or Fee	Lease No. NM-25876
Location Unit Letter M : 660 Feet From The South Line and 660 Feet From The West Line Section 24 Township 22S Range 31E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Texaco Trading & Transportation Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 6196, Midland, TX 79711					
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 G	Sec. 24	Twp. 22S	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 XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 02-24-90	Date Compl. Ready to Prod. 03-27-90		Total Depth 8000		P.B.T.D. 7587			
Elevations (DF, RKB, RT, GR, etc.) 3585 GR	Name of Producing Formation Delaware		Top Oil/Gas Pay 7062		Tubing Depth 7118			
Perforations 7062-66, 69-74, 81, 7096-7101 (30 holes)					Depth Casing Shoe 8000			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
14-3/4"	11-3/4"		840'		700 Post ID-2			
11"	8-5/8"		4500'		1350 5-4-90			
7-7/8"	5-1/2"		8000'		1950 Comp & Bk			

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 03-23-90	Date of Test 04-16-90	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 353	Water - Bbls. 219	Gas - MCF 185

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 J. A. Head
Printed Name J. A. Head Area Manager
Date 04-26-90 Telephone No. 505-393-7191

OIL CONSERVATION DIVISION

APR 27 1990

Date Approved

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.