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Appropriate District Office
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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

MAY 28 1991

O. C. D.
ARTESIA, OFFICE

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

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REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

| | |
|---|---|
| Operator Texaco Producing Inc. | Well API No. 30-015-26502 |
| 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 Neff 13 Federal | Well No. 5 | Pool Name, including Formation Livingston Ridge Delaware | Kind of Lease State, <u>Federal</u> or Fee | Lease No. NM-29233 |
| Location Unit Letter <u>F</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line Section <u>13</u> Township <u>22S</u> Range <u>31E</u> , NMPM, <u>Eddy</u> 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"/> Texaco Trading and Transportation | Address (Give address to which approved copy of this form is to be sent) P.O. Box 60628 Midland, Texas 79711-0628 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Texaco Producing Inc. | Address (Give address to which approved copy of this form is to be sent) P.O. Box 730 Hobbs, New Mexico 88240 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit H | Sec. 13 | Twp. 22S | Rge. 31E | Is gas actually connected? Yes | When? 5-23-91 |

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 X | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v |
| Date Spudded 2-4-91 | Date Compl. Ready to Prod. 5-1-91 | | Total Depth 8398 | | P.B.T.D. 8313 | | | |
| Elevations (DF, RKB, RT, GR, etc.) GR-3580', KB-3594' | Name of Producing Formation Brushy Canyon | | Top Oil/Gas Pay 6902 | | Tubing Depth 8214 | | | |
| Perforations 6902-6906, 8007-8010, 8020-8032, 8204-8216 W/2 JSPF (62 holes) | | | | | Depth Casing Shoe 8398 | | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 14 3/4 | 11 3/4 | | 840 | | 800 | | | |
| 11 | 8 5/8 | | 4341 | | 1726 | | | |
| 7 7/8 | 5 1/2 | | 8398 | | 1450 | | | |

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 3-6-91 | Date of Test 5-22-91 | Producing Method (Flow, pump, gas lift, etc.) Pumping 2.5*1.75*24 | |
| Length of Test 24 | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test 2091 GOR | Oil - Bbls. 55 | Water - Bbls. 298 | Gas - MCF 115 |

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
M.C. Duncan
Printed Name
5-23-91
Date
Engineer's Assistant
Title
393-7191
Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAY 24 1991

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 multivly completed wells