

DISTRICT 2

P.O. Box Drawer DD, Artesia, NM 88211-0719

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT IV

P.O. Box 2088, Santa Fe, NM 87504-2088

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

Submit to Appropriate District Office

5 Copies

☐ AMENDED REPORT

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator Name and Address TEXACO EXPLORATION & PRODUCTION INC. P.O. BOX 730, HOBBS, NM 88240		² OGRID Number 022351
⁴ API Number 30-015-28363	⁵ Pool Name WILDCAT BRUSHY CANYON BONE SPRING	⁶ Pool Code
⁷ Property Code 17551	⁸ Property Name REMUDA BASIN STATE	⁹ Well No. 17

11. Surface Location

UI or lot no. M	Section 31	Township 23-S	Range 30-E	Lot.Idn	Feet From The 660	North/South Line SOUTH	Feet From The 660	East/West Line WEST	County EDDY
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11 Bottom Hole Location

Ul or lot no.	Section	Township	Range	Lot.Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
¹² Lse Code S	¹³ Producing Method Code N/A	¹⁴ Gas Connection Date N/A		¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date		¹⁷ C-129 Expiration Date	

III. Oil and Gas Transporters

18 Transporter OGRID	19 Transporter Name and Address	20 POD	21 O/G	22 POD ULSTR Location and Description
	DRILLING PENDING			
				RECEIVED
				SEP 07 1995
				OIL CON. DIV. DIST. 2

IV. Produced Water


23 POD	24 POD ULSTR Location and Description
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V. Well Completion Data

Well Completion Data				
²⁵ Spud Date	²⁶ Ready Date	²⁷ Total Depth	²⁸ PBTD	²⁹ Perforations
³⁰ HOLE SIZE	³¹ CASING & TUBING SIZE	³² DEPTH SET	³³ SACKS CEMENT	
			Post ID-3	
			9-22-95	
			ch. well name	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Date of Test	³⁷ Length of Test	³⁸ Tubing Pressure	³⁹ Casing Pressure
⁴⁰ Choke Size	⁴¹ Oil - Bbls.	⁴² Water - Bbls.	⁴³ Gas - MCF	⁴⁴ AOF	⁴⁶ Test Method

46	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.	OIL CONSERVATION DIVISION Approved By: <u>ORIGINAL SIGNED BY TIM W. GUNZ</u> <u>DISTRICT II SUPERVISOR</u>
Signature		Title: _____
Printed Name	Monte C. Duncan	Approval Date: <u>SEP 11 1995</u>
Title	Engr Asst	
Date	9/1/95	
Telephone	397-0418	

47 If this is a change of operator fill in the OGRID number and name of the previous operator			
Previous Operator Signature	Printed Name	Title	Date