

DISTRIBUTION	
ANTAFE	
FILE	
S.G.S.	
AND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
 Supersedes Old C-104 and C-110
 Effective 1-1-65

I. OPERATOR

Operator
Texaco Inc.

Address
P.O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box) (Other: Please explain)

New Well Change of Transporter

Recompletion Change in Lease Change in Ownership

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico 'AE' State 25 Vacuum Abo Reef	Kind of Lease State, Federal or Fee	Lease No. B-1258-1
Location		
Unit Letter B	Section 990	Range North Township 1780
Line of Section 11	Range 18-S	County Lea

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Texas-New Mexico Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1510, Midland, Texas 79701
Name of Authorized Transporter of Gas Texaco Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 728, Hobbs, New Mexico 88240

If well produces oil or liquids, give location of tanks. Is gas actually connected? When?

F 12 18 34 Yes 11-18-75

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

IV. COMPLETION DATA

Designate Type of Completion	Well	Log Area	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					
Date Spudded	Date Log Run	Depth	F.B.T.D.					
9-02-75	10-30-75	9050'	9050'					
Elevations (DF, RKB, RT, Gh, etc.)	Stratigraphic Correlation	Log to Base of	Tubing Depth					
4012' DF	Vacuum Abo Reef		8403'					
Perforations	2 JSPF @ 8434', 40', 45', 8606', 22', 75', 86', 96', 8709'		Depth Casing Shoe					
	18', 26', 32', 42, 56', 64', 70', 78', 88', 98', 8803', 16', 25', 34, 45', 863'.		9050'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET	SACKS CEMENT				
17 1/2"	13 3/8"		40'	50				
11"	8 5/8"		1760'	200				
7 7/8"	5 1/2"		9050'	1400				

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 Tanks 10-30-75	Date of Test 11-18-75	Producing Method (Flow, pump, gas lift, etc.) Gas Lift
Length of Test 24 hrs.	Test Pressure (shut-in)	Casing Pressure
Actual Prod. During Test 42	Water (bbls.) 6	Gas-MCF 79

GAS WELL

Actual Prod. Test-MCF/D	Leak-off Test	Bulk Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Test Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

[Signature]
 Assistant District Superintendent

11-21-75

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY *[Signature]*

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.