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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

**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
TEXACO Inc.
 Address
P.O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box) Other (Please explain)
 New Well Change in Transporter of: **Change Perforations in Abo String**
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner _____
 THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico 'N' State	Well No. 8	Pool Name, including Formation Vacuum Abo North R-4184	Kind of Lease State, Federal or Fee State	Lease No. B-1722-1
Location Unit Letter D ; 550 Feet From The North Line and 500 Feet From The West Line of Section 30 Township 17S Range 35E , NMPM, Lea 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"/> 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 Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> 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.	Unit 0	Sec. 36	Twp. 17S	Rge. 34E
Is gas actually connected? Yes				When June 24, 1971

If this production is commingled with that from any other lease or pool, give commingling order number: **PLC-4**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X			X				
Date Spudded October 2, 1964	Date Compl. Ready to Prod. November 4, 1964	Total Depth 10,300'		P.B.T.D. 10,292'				
Elevations (DF, RKB, RT, GR, etc.) 4002' DF	Name of Producing Formation Abo	Top Oil/Gas Pay 8,494'		Tubing Depth -				
Perforations Perf w/1 JSPF (8494-97, 8500-04, 8508-15, 8526-30, 8532-38, and 8544-49').						Depth Casing Shoe 10,300'		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	374'	450 SX
12-1/2"	9-5/8"	4,800'	500 SX
8-5/8"	2-7/8"	10,300'	1,800 SX
8-5/8"	2-7/8"	10,300'	1,800 SX
8-5/8"	2-7/8"	10,300'	1,800 SX

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

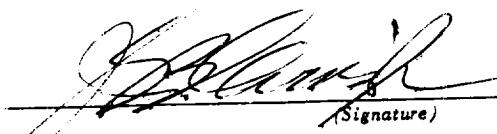
Date First New Oil Run To Tanks June 24, 1971	Date of Test June 24, 1971	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs	Tubing Pressure 60	Casing Pressure -	Choke Size 28/64
Actual Prod. During Test 140	Oil-Bbls. 123	Water-Bbls. 17	Gas-MCF 39.4

GAS WELL

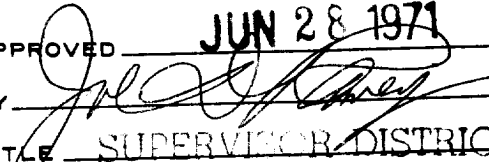
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.


 Assistant District Superintendent
 June 25, 1971
 (Date)

OIL CONSERVATION COMMISSION

APPROVED **JUN 28 1971**, 19____
 BY 
 TITLE **SUPERVISOR DISTRICT I**

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.

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JUN 25 1971

015 CONSERVATION COMM
HOBBS, N. M.