V

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DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		

. April 1, 1969

(Date)

DISTRIBUTION SANTA FE		NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE	
U.S.G.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
LAND OFFICE	ASTHORIZATION TO TRA		
TRANSPORTER OIL			
GAS	·		
PRORATION OFFICE			
Operator	:		
TEXACO	Inc.		
Address		0001.0	
Reason(s) for filing (Check proper b	Box 728, Hobbs, New Mexico	0 88240 Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Cil Dry Ga	s 🔲	
Change in Ownership	Casinghead Gas Conder	sate	
If change of ownership give name			
and address of previous owner			
H. DESCRIPTION OF WELL AN	DYFASE	La de La como	
Lease Name	Well No. Pool Name, Including F	,	į
New Mexico "CQ" State	3 Underignated	State, Fede	E=8835
Location		0.000	T
Unit Letter 0; 7	Feet From The South Lin	le and 2080 Feet From	n The <u>East</u>
Line of Section 35	Cownship 10-S Range	33 - ≅ , nmpm,	Lea County
Line of Section 35	ownship 10=5 Name	, , , , , , , , , , , , , , , , , , , ,	
III. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL GA	ıs	
Name of Authorized Transporter of (or Condensate Amoco Pipeline Co.	Address (Give address to which app	roved copy of this form is to be sent)
Service Pipe Line Co.		3)11 Knoxville Ave.,	Tubbock, Texas 79408
	controlled to a or uy (era		
Warren Petroleua Comp.	nny Tunn Dec. Twp. Tage.	Lowlegher, New Mexico	Viner
If well predicted oil or liquida, the liquida of torker	K 35 10-S 33-E		April 1, 1969
have a constant of the constan			
If this production is commingled IV. COMPLETION DATA	with that from any other lease or pool,	give comminging order number.	
	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Resty.
Designate Type of Comple		X	P.B.T.D.
Date Spudded	Date Compl. Heady to Prod.	Total Depth	9872*
comucry 31, 1969 Elevations (DF, KKB, KT, GR, etc.	Nama of Producing Formation	Top Otl/Kik Pay	Tubing Depth
11.017 t (n tr)	Page evil want an	98391	9836 •
Perforations 4 1/2 " C. D	· Casing perforated 11/2 JS	SPI @ 9839' and 9843'.	Depth Casing Shoe
Perforated 4 1/2" W/2	JSFF from 9851! to 985 <u>5!.</u>		
	TUBING, CASING, AN	D CEMENTING RECORD	CACKE CENEUT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/27	13 3/6"	2001	850 Sx.
3.2 1/).11	7 5/8"	39981	900 Sx.
7 5/8" 6 3/J"), 7/2"	22001	800 Sx.
V TEST DATA AND REQUEST	FOR ALLOWARIE (Test must be a	ifter recovery of total volume of load of	oil and must be equal to or exceed top allow
OH, WELL	tiple years	epth or be for full 24 hours) Producing Method (Flow, pump, gas	
Dute ritist flow Of Hun To Tanks	Date of Test		• • • • • • •
March 25, 1969 Length of Test	April 1, 1969 Tubing Pressure	Casing Pressure	Choke Size
2l ₁	300#	Packer	21. /61.11 Gas-MOF
Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	
	172	7	473
-			
GAS WELL	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	wendin or rear	=	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VI. CERTIFICATE OF COMPLIA	ANCE	OIL CONSER	VATION COMMISSION
		100000100	1969 19
I hereby certify that the rules and regulations of the Oil Conservation APPROVED		Remark	
Commission have been complie above is true and complete to	we is true and complete to the best of my knowledge and belief.		Jungan
-		TITLE	, Б Г
, 1 1 u		il .	in compliance with RULE 1104.
		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened	
- Yalan Jan	ignaturej	well, this form must be accome tests taken on the well in ac	maniac by a galacide of the dollarion
Assistant District S		All sections of this form	must be filled out completely for allow
	(Title)	able on new and recompleted	wells.

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.