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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 Tahoe Oil & Cattle Co.	
Address P.O. Box 7032 Midland, Texas 79703	
Reason(s) for filing (Check proper box)	Other (Please specify)
New Well <input checked="" type="checkbox"/>	Casinghead Gas MUST NOT BE FLARED AFTER 2/1/78 UNLESS AN EXCEPTION TO R-4079 IS OBTAINED.
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

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
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name T.P. Federal	Well No. 1	Pool Name, Including Formation Undesignated- San Andres	Kind of Lease State, Federal or Fee Federal	Lease No. NM 2390
Location Unit Letter H ; 1980 Feet From The North Line and 660 Feet From The East Line of Section 22 Township 9S Range 37E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 1183 Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Cities Service	Address (Give address to which approved copy of this form is to be sent) Bartlesville, Okla. 74101					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 22	Twp. 9S	Rge. 37E	Is gas actually connected? No	When

If this production is commingled with that from any other lease or pool, give commingling order number: No

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 10-24-77	Date Compl. Ready to Prod. 2-16-78	Total Depth 5050	P.B.T.D. 5031					
Elevations (DF, RKB, RT, GR, etc.) RKB 3978; DF 3977; GL3967	Name of Producing Formation San Andres	Top Oil/Gas Pay 5022	Tubing Depth 4956-5022					
Perforations 4956-59-62-65-73-94-5001-06-14-22	Depth Casing Shoe 3966							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	455'	300 Sx
7 7/8"	4 1/2"	5049'	750 sx
	2 3/8"	4985'	None

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 2-16-78	Date of Test 2-16-78	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hrs	Tubing Pressure	Casing Pressure 25	Choke Size
Actual Prod. During Test	Oil - Bbls. 86 BOPD	Water - Bbls. 10 BWPD	Gas - MCF 85 MCFPD

GAS WELL

Actual Prod. Test - MCF/D N/A	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.


(Signature)

Petroleum Engineer

2-27-78

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

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.

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

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MAR 6 1978
OIL CONSERVATION COMM.
HOBBS, N. M.