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TRANSPORTER	OIL	
	GAS	
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE P.O.C.
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	
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico "CT" State	Well No. 7	Pool Name, Including Formation Todd Lower San Andres	Kind of Lease <u>State</u> , Federal or Fee
Location Unit Letter E ; 660 Feet From The West Line and 1980 Feet From The North Line of Section 35 , Township 7-S Range 35-E , NMPM, Roosevelt 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"/> Mobil Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1073 - Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Cities Service Oil Company	Address (Give address to which approved copy of this form is to be sent) 5th Floor - Broadmoor Bldg. - Hobbs, N. M.					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 35	Twp. 7-S	Rge. 35-E	Is gas actually connected? YES	When April 17, 1967

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 OIL	Gas Well NO	New Well NEW	Workover NEW	Deepen NEW	Plug Back NEW	Same Res'v. NEW	Diff. Res'v. NEW
Date Spudded April 3, 1967	Date Compl. Ready to Prod. April 16, 1967		Total Depth 4360'		P.B.T.D. 4350'			
Pool Todd Lower San Andres	Name of Producing Formation San Andres		Top Oil/Gas Pay 4280'		Tubing Depth 4265'			
Perforations Perforate 4 1/2" Casing with two jet shots at 4280', 4284', 4292', 4297', 4308', 4316', and 4320'. <i>AKR</i>					Depth Casing Shoe 4360'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
9 5/8"	7 5/8"		357'		200 Sx.			
6 3/4"	4 1/2"		4360'		500 Sx.			

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 April 14, 1967	Date of Test April 16, 1967	Producing Method (Flow, pump, gas lift, etc.) Swab	
Length of Test 24 Hours	Tubing Pressure Swab	Casing Pressure Swab	Choke Size Swab
Actual Prod. During Test 61	Oil - Bbls. 50	Water - Bbls. 11	Gas - MCF 35.0

GAS WELL

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

Dan Gillett
Dan Gillett (Signature)

Assistant District Superintendent
(Title)

April 17, 1967
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

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.

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

Fill out Sections I, II, III, and VI only 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.