	1		
NO, OF COPIES RECEIVED			
DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	HUBPC DEForm C-104
FILE	REQUES	T FOR ALLOWABLE	Superseques Old C-104 and C
U.S.G.S.		AND	Effective Fi-ba
LAND OFFICE	AUTHORIZATION TO T	AND RANSPORT OIL AND NATU!	RALIGAS 11 05 AM PCC
OIL			00 111 00
TRANSPORTER GAS			
OPERATOR			
PRORATION OFFICE			
Amatar			
TEXAS PACIFIC OIL	COMPANY		
Address			
P.O. Box 1069 - H	lobbs. New "exico		
Reason(s) for filing (Check proper	box)	Other (Please explain	n)
tiew Well	Change in Transporter of:		
iteromy letion	Cil Dry	Gas	
Change in Cwnership	Casinghead Gas 💭 Conc	iensate	
If change of our eaching since			
If change of ownership give name and address of previous owner	e	S.C.	21 1 6 1 1
	1.	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	11 .
DESCRIPTION OF WELL AN		Van he V	and had the
Leuse Name	Well Nor Pool N	Name, Including Formation	AKE- Kind of Lease
State "AH"	1 Und	lasignated PENNSYL	VANIA AState, Decoborde
Location:		R-3045	
Unit Letter;;	1980 Feet From The North L	ine and 1980 Feet	From The West
	`		
Line of Section 14 ,	Township 12 Range	, NMPM,	Lea County
	· · ·		· ·
DESIGNATION OF TRANSPO Name of Authorized Transporter of S	RTER OF OIL AND NATURAL G		
Permian Corp.	Oil 🚺 or Condensate 🗌		approved copy of this form is to be sent)
Name of Authorized Transporter of s		P.O. Box 3119 - Midland, Texas Address (Give address to which approved copy of this form is to be sent)	
Nume of Authorized Transporter of a	Casinghead Gas or Dry Gas	Address (Give address to which	approved copy of this form is to be sent)
	Unit Sec. Twp. Rge.	Is gas actually connected?	1
If well produces oil or liquids, give location of tanks.	Test Tanks		When
	with that from any other lease or pool	No	Battery Connected
11-13-6 5	1-2-65 Name of Producing Formation	10,362	10,3371 Tubing Depth
Undesignated	Bough C	99301/	
Perforations			10,332 Depth Casing Shoe
9930-40-54-73-79-6	82-861		10,362
· · · · · · · · · · · · · · · · · · ·	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17*	13-3/8"	3451	400
11*	8-5/8"	4177 •	2630
7-7/8*	4-1/2#	10,362*	2262
	2-3/8	10,332*	
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of loa	ad oil and must be equal to or exceed top allo
OIL WELL	able for this a	lepth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,)	gas lift, etc.)
1-3-66	1-3-66	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hr.	800#	Packer	12/64"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
245	240	5	327
GAS WELL Actual Frod. Test-MCF/D	Length of Test	Dhia Contract Ages	
THE ARE FROM FOR THE FUNCTION	Length of Test	Bbls, Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Cooler Deve	
. sound protion (prior, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
CERTIFICATE OF COMPLIA	NCE	OIL CONSE	RVATION COMMISSION
	regulations of the Oil Conservation with and that the information given	APPROVED	, 19
bove is true and complete to the	with and that the information given he best of my knowledge and belief.	€вү	
)			
		TITLE	rict 1
	≤ 1 C	This form is to be filed	1 in compliance with RULE 1104.
-Ticker 1	Itar. A		allowable for a newly drilled or deepene
(Signature)		well, this form must be acco	ompanied by a tabulation of the deviatio
Area Superintendent		tests taken on the well in accordance with RULE 111.	
(Title)		All sections of this form able on new and recomplete	m must be filled out completely for allow ad wells.
January 5, 1	966	Fill out Sections I, II, III, and VI only for changes of owner	
(Date)		well name or number, or transporter, or other such change of condition	
		Separate Forms C-104 must be filed for each pool in multipl	
		completed wells	must be filed for each pool in multiply

DEVIATION REPORT

Footage 340		Slope
		10
895		1/40
1410		1/40
1800		1/40
2290		3/40
2664		1-1/40
3220		1-1/20
3690		10
4030		1-1/20
4525		1/20
4790		3/40
5140		1/20
5448		1-1/4°
5760		1/40
6220		1/4°
6780		3/ 4°
7040		3/40
7330		3/40
7560		1/40
7740		1/40
8189		1/40
8377		3/40
8620		3/40
8860		1-1/20
9115		1-1/40
9 3 70		3/40
98 3 5		3/40
98 85		3/40
9987		3/40
10069		3/40
10240	í ,	10
10360		3/40
	;	<i>21</i> 4

I hereby certify the information given above is true and complete to the best of my knowledge.

TEXAS PACIFIC OIL COMPANY

alter Sheldon Ward

District Superintendent

Subscribed and Sworn to before me this <u>5th</u> day of January, 1966.

Notary Public

Lea County, New Maxico

My commission expires August 15, 1969.