Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Ene Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

Manual Company		IO IR	ANSF	ORTOI	L AND NA	TUHAL G			5017			
Operator Texaco Exploration and Production Inc.								Well API No. 30 025 21843				
Address						00 020 21043						
	ew Mexico	8824	0-25	28								
Reason(s) for Filing (Check proper box) New Well		Channa la	- T	and an offi		her <i>(Please exp</i> FFECTIVE <i>6</i>	•					
Recompletion	Oil	Change in	Dry G		5	FFECTIVE 6)— I— 9 I					
Change in Operator	Casinghead	iGas 🗀	Conde									
if change of operator give name and address of previous operator Tex	aco Inc.	P. 0.	Вох	730 F	lobbs, Ne	w Mexico	88240)-25	28			
II. DESCRIPTION OF WELI	AND LEA											
Lease Name Well No. Pool Name, Inclus NEW MEXICO AN STATE 10 SAUNDERS P					ing Formation ERMO UPPER PENN			Kind of Lease State, Federal or Fee		5436	Lease No.	
Location	1	10	SAU	NDERS PE	KMO UPP	EK PENN	<u></u>	TAI	E	3430		
Unit LetterE	:1980		_ Feet F	rom The NO	RTH Li	e and660	0.	_ Fe	et From The	WEST	Line	
Section 22 Towns	nip 14	s	Range	33E	, N	мрм,			LEA		County	
III. DESIGNATION OF TRA	NSPORTE	R OF O	IL AN	D NATU	RAL GAS							
Name of Authorized Transporter of Oil Texas New Mexico Pipeline		or Conde	nsate			e address to w					•	
Name of Authorized Transporter of Casinghead Gas X or Dry Gas						1670 Broadway Denver, Colorado 80202 Address (Give address to which approved copy of this form is to be sent)						
Warren Petroleum Corporation									sa, Oklahoma 74102			
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 22	Twp.	Rge. 33E	is gas actual	YES	1	/hen		/19/66		
If this production is commingled with the IV. COMPLETION DATA	from any other	r lease or	pool, gi	ve comming!	ing order num	ber:						
· · · · · · · · · · · · · · · · · · ·	~~~	Oil Well		Gas Well	New Well	Workover	Deep	en	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion Date Spudded	Date Compl. Ready to Prod.			Total Depth	<u> </u>	<u> </u>		222	l			
Date Space	Date Compt. Ready to Prod.				Total Depth				P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	OKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay				Tubing Depth		
Perforations						La. 117				Depth Casing Shoe		
TUBING, CASING AND						CEMENTING RECORD						
HOLE SIZE	CAS	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
										·		
	-											
V. TEST DATA AND REQUE OIL WELL (Test must be after				oil and must	he equal to or	exceed ton all	awahle foe	- this	death ar he f	or full 24 hou		
Date First New Oil Run To Tank						be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pressure				Casing Pressure				Choke Size			
41717								_	Gas- MCF			
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.				Oar Wei			
GAS WELL												
Actual Prod. Test - MCF/D	Prod. Test - MCF/D Length of Test					Bbls. Condensate/MMCF				Gravity of Condensate		
osting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)				Choke Size			
VI. OPERATOR CERTIFIC	'ATE OF	COMP	TIAN	ICF	<u></u>				 -			
I hereby certify that the rules and regu	lations of the O	il Conser	vation			DIL CON	ISER	VA	I NOIT	DIVISIO	NC	
Division have been complied with and is true and complete to the best of my	that the inform	ation give		:							:	
		ज्यादा.			Date	Approve	d		·			
7. M. Willer												
Signature K. M. Miller Div. Opers. Engr.					By							
Printed Name Title May 7, 1991 915-688-4834					Title							
Date			-bose N		1							

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.