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 LAND OFFICE _____
 TRANSPORTER OIL
 GAS
 OPERATOR _____
 PRODUCTION 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

DEC 22 10 11 AM '66

I. **PRODUCER**
 NAME: TEXACO Inc.
 ADDRESS: P. O. Box 728 - Hobbs, New Mexico
 REASONS FOR FILING (Check proper box) Other (Please explain) _____
 New Well Change in Transporter of: _____
 Reclassification Oil Dry Gas
 Name of ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name: N. M. "A2" State NCT-11 Well No.: 1 Pool/Name, including Formation: Lazy J Pennsylvanian Kind of Lease: State, Federal or Fee
 Location: Unit Letter J, 1980 Feet From The South Line and 1980 Feet From The East
 Line of Section 3, Township 14-S Range 33-E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)
The Permian Corporation 1509 West Wall Ave. - Midland, Texas
 Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)
Vented (To be connected later)
 If well produces oil or liquids, give location of tanks. Unit J Sec. 3 Twp. 14-S Rge. 33-E Is gas actually connected? NO When _____

If this production is commingled with that from any other lease or pool, give commingling order number: NONE

IV. COMPLETION DATA

| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
|--|-----------------------------|----------|-------------------|----------|--------|-------------------|-------------|--------------|
| | CIL | NO | NEW | NEW | NEW | NEW | NEW | NEW |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | | P.B.T.D. | | |
| November 11, 1966 | December 22, 1966 | | 10,030' | | | 10,005' | | |
| Pool | Name of Producing Formation | | Top Oil/COND. Pay | | | Tubing Depth | | |
| Lazy J Pennsylvanian | Wolfecamp | | 9,849' | | | 10,000' | | |
| Perforations Perf 4 1/2" Casing 2 jet shots at 9849', 9859', 9867', 9881', 9884', 9888', 9893', 9912', 9917', and 9931'. | | | | | | Depth Casing Shoe | | |
| | | | | | | 10,030' | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | | SACKS CEMENT | | |
| 15" | 11 3/4" | | 376' | | | 100 Sx. | | |
| 10 5/8" | 8 5/8" | | 1150' | | | 1300 Sx. | | |
| 7 5/8" | 4 1/2" | | 10030' | | | 1100 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 | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
|---------------------------------|-------------------|---|------------|
| December 18, 1966 | December 22, 1966 | Flow | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| 24 Hours | 375 | - - - | 20/64" |
| Actual Prod. During Test | Oil-Bbls. | Water-Bbls. | Gas-MCF |
| LC6 | 208 | 198 | 411.8 |

GAS WELL

| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
|------------------------------------|-----------------|-----------------------|-----------------------|
| | | | |
| Producing Method (pilot, 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)
 Anderson District Superintendent
 December 22, 1966 (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 change 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.