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OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT II P.O. Drawer DD, Artesia, NM \$8210

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87 r			BLE AND AUTHOR					
I. TO TRANSPORT OIL AND NATURAL GAS					Well API No.			
Texaco Exploration and Production Inc.					25 28819		OK	
Address P. O. Box 730 Hobbs.	New Mexico 882	40_2528						
Reason(s) for Filing (Check proper l		40-2528	X Other (Please exp	lain)				
New Well		in Transporter of:	EFFECTIVE (
Recompletion	oii (Dry Gas						
Change in Operator	Casinghead Gas	Condensate				•		
If above of anomics since same		0. Box 730	Hobbs, New Mexico	88240-25	28			
II. DESCRIPTION OF WE	LL AND LEASE							
	Lease Name Well No. Pool Name, Includi				Lease	Lean		
NEW MEXICO AQ STATE	NCT 11 3	LAZY J PEN	N	STAT	Federal or Fee E	543880		
Location Unit LetterK	1980	Feet From The S	OUTH Line and 198	30F	et From The Wi	EST	Line	
Section 3 To	waship 14S	Range 33E	, NMPM,		LEA		County	
III. DESIGNATION OF T	RANSPORTER OF	OIL AND NATU	JRAL GAS					
Name of Authorized Transporter of Texas New Mexico Pipel	Address (Give address to which approved copy of this form is to be sent) 1670 Broadway Denver, Colorado 80202							
Name of Authorized Transporter of Warren Peti	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589 Tulsa, Oklahoma 74102							
If well produces oil or liquids, give location of tanks.	orduces oil or liquids, Unit Sec. Twp. Rg		is gas actually connected? YES	? 02/11/67				
If this production is commingled with	h that from any other lease	or pool, give commin	gling order number:					
IV. COMPLETION DATA	loii w	Vell Gas Well	New Well Workover	Deepen	Plug Back Sa	me Res'v	iff Res'v	
Designate Type of Comple	etion - (X)	i		نــــــــــــــــــــــــــــــــــــــ		i		
Date Spudded	Date Compl. Read	y to Prod.	Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay		Tubing Depth			
Perforations		<u></u>			Depth Casing S	shoe		
	TUBIN	G, CASING ANI	CEMENTING RECO	RD				
HOLE SIZE	CASING &	TUBING SIZE	DEPTH SET		SACKS CEMENT			
V. TEST DATA AND REC	TIEST FOR ALL O	WARLE						
OIL WELL (Test must be	after recovery of total volu	me of load oil and mu	st be equal to or exceed top a	llowable for thi	s depth or be for	full 24 hours.)	
Date First New Oil Run To Tank Date of Test			Producing Method (Flow, pump, gas lift, etc.)					
Length of Test	Tubing Pressure	Tubing Pressure		Casing Pressure		Choke Size		
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.		Water - Bbls.		Gas- MCF		
					<u> </u>			
GAS WELL	The section of the sec		Bbis. Condensate/MMCF		Gravity of Coo	odensale		
Actual Prod. Test - MCF/D	rengin of less	Length of Test						
Testing Method (pitot, back pr.)	Tubing Pressure (Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size		
VI. OPERATOR CERT I hereby certify that the rules and			OIL CC	NSERV	ATION D	IVISIO	N	
Division have been complied wi	th and that the information	given above				بحاديث	2 ·	
is true and complete to the best of my knowledge and belief.			Date Approv	/ed		413 12	-	
7. M. Miller			By		<u> </u>	. Alu IIV egyn	i	
Signature K. M. Miller	Div.	Opers. Engr.				ì		
Printed Name		Title	Title					

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

May 7, 1991

Date

- 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.

915-688-4834

Telephone No.

- 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.