

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

COPIES RECEIVED	
INSTITUTION	
DATE	
NAME	
ADDRESS	
CITY	
STATE	
ZIP	
REPORTER	
OIL	
NATURAL GAS	
LOCATION	
DATE OF OFFICE	
DATE OF FIELD	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

TEXACO INC.

Address

P.O. BOX 728, HOBBS, NM 88240

Reason(s) for filing (Check proper box)

New Well ☒
Completion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
N.M. "AQ" State (NCT-11)	3	Lazy J Penn	State, Federal or Fee	B-9380

Location

Unit Letter K ; 1930 Feet From The South Line and 1900 Feet From The WestLine of Section 3 Township 14-S Range 33-E , NMPM, Lea County

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, TX
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Warren Petroleum Company	P.O. Box 1579, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks.	Is gas actually connected? <u>Yes</u> when <u>10-24-84</u>

If this production is commingled with that from any other lease or pool, give commingling order number:

VI. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☒	Gas Well ☐	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Same Res't, Diff. ☐
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
09-01-84	10-24-84	10,000'	9960'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
4225' (GR)	Penn	9768'	9948'				
Perforations			Depth Casing Shoe				
9768-9916'			10,000'				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	527'	600
12-1/4"	8-5/8"	4159'	2000
7-7/8"	5-1/2"	10000'	2350

VII. 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 able 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.)	
10-24-84	10-25-84	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	--	--	--
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	64	139	74

GAS WELL

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

VIII. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

DISTRICT OPERATIONS MANAGER

November 1, 1984

OIL CONSERVATION DIVISION

NOV - 5 1984

APPROVED _____, 19

BY _____
DISTRICT OPERATIONS MANAGER

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of record.

Separate Form C-104 must be filed for each pool in multi-completed wells.