

STATE OF NEW MEXICO  
OIL AND MINERALS DEPARTMENT

Oil Conservation Division

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-1-78

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator

TEXACO Inc.

Address

P. O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

New Well

Recompletion

Change in Ownership

Change in Transporter of:

Oil

Condensate

Other (Please explain)

Additional transporters effective 8-1-79.

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name

Central Vacuum Unit

Well No.

104

Pool Name, including Formation

Vacuum Grayburg San Andres

Kind of Lease

State, Federal or Fee

Lease No.

B-1113-1

Location

Unit Letter F; 1980 Feet From The North Line and 1748 Feet From The West

Line of Section

6

Township

18-S

Range

35-E

NMPM

Lea

County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate

Mobil Pipe Line Company

Address (Give address to which approved copy of this form is to be sent)

P. O. Box 900, Dallas, Texas 75221

Name of Authorized Transporter of Gas or Dry Gas

Phillips Petroleum Company

Address (Give address to which approved copy of this form is to be sent)

4001 Penbrook, Odessa, Texas 79762

TEXACO Inc.

P. O. Box 728, Hobbs, New Mexico 88240

If well produces oil or liquids, give location of tanks.

Unit E; Sec. 31; Twp. 17-S; Rge. 35-E

Is gas actually connected?

Yes

When

8-1-79

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

COMPLETION DATA

Designate Type of Completion - (X)

Oil Well

Gas Well

New Well

Workover

Deepen

Plug Back

Same Res'v.

Diff. Res'v.

Date Spudded

Date Compl. Ready to Prod.

Total Depth

P.B.T.D.

Elevations (DF, RAB, RT, CR, etc.)

Name of Producing Formation

Top Oil/Gas Pay

Tubing Depth

Perforations

Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE

CASING & TUBING SIZE

DEPTH SET

SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks

Date of Test

Producing Method (Flow, pump, gas lift, etc.)

Length of Test

Tubing Pressure

Casing Pressure

Choke Size

Actual Prod. During Test

Oil-Bbls.

Water-Bbls.

Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D

Length of Test

Bbls. Condensate/MMCF

Gravity of Condensate

Testing Method (pilot, back pr.)

Tubing Pressure (shut-in)

Casing Pressure (shut-in)

Choke Size

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.

Assistant District Superintendent

September 14, 1979

OIL CONSERVATION DIVISION

APPROVED

BY

TITLE

SEP 21 1979

Jerry Sexton

Dist 1, Supv.

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 logs 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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Form C-104 must be filed for each pool in multiple