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LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND ~~HOBBS OFFICE~~ **HOBB'S OFFICE**
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

APR 25 2 45 PM '66

I. Operator **TEXACO Inc.**
Address **P. O. Box 728 Hobbs, New Mexico**
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "AE" N. Mex AE State	Well No. 23	Pool Name, including Formation Vacuum	Kind of Lease State, Federal or Fee
Location Unit Letter A ; 330 Feet From The East Line and 330 Feet From The North Line of Section 11 , Township 18-S Range 34-E , NMPM, Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas-New Mexico Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510 Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 6666 Odessa, Texas					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 12	Twp. 18-S	Rge. 34-E	Is gas actually connected? Yes	When April 25, 1966

If this production is commingled with that from any other lease or pool, give commingling order number: **CTB-73**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> No	<input type="checkbox"/> New	<input type="checkbox"/> New	<input type="checkbox"/> New	<input type="checkbox"/> New	<input type="checkbox"/> New	<input type="checkbox"/> New	<input type="checkbox"/> New
Date Spudded February 11, 1966	Date Compl. Ready to Prod. April 23, 1966		Total Depth 4740'			P.B.T.D. 4736'		
Pool Vacuum	Name of Producing Formation Grayburg-San Andres		Top Oil/Gas Pay 4688			Tubing Depth 4450'		
Perforations Perforate 4 1/2" OD casing with one jet shot at 4459', 4516', 4526', 4535', 4542', 4580', 4584', 4638', 4643', and 4660'.						Depth Casing Shoe 4740'		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
9 7/8"	7 5/8"		1604'			760 SX		
6 3/4"	4 1/2"		4740'			300 SX		

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)

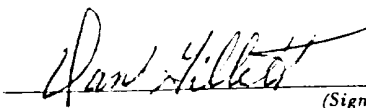
Date First New Oil Run To Tanks April 20, 1966	Date of Test April 23, 1966	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hours	Tubing Pressure Pump	Casing Pressure - - -	Choke Size Pump
Actual Prod. During Test 19	Oil-Bbls. 2	Water-Bbls. 17	Gas-MCF TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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
(Signature)
Assistant District Superintendent
(Title)
April 25, 1966
(Date)

OIL CONSERVATION COMMISSION

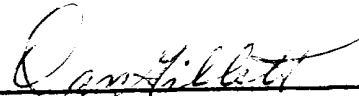
APPROVED _____, 19____
BY _____
TITLE _____

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 changes 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.

HOBBS OFFICE O. C. C.


APR 25 2 45 PM '66

I, Dan Gillett, being of lawful age and being the
Assistant District Superintendent for TEXACO Inc., do state that
the deviation record which appears on this form is true and correct to
the best of my knowledge.


Dan Gillett

Subscribed and sworn to before me this the 25th day of February,
19 66.

My commission expires October 20, 1966.


R. E. Johnson
Notary Public in and for Lea County,
State of New Mexico.

Lease State of New Mexico "AE" Well No. 23

DEVIATION RECORD

DEPTH

DEGREES OFF

409'
812'
942'
1335'
1605'
1779'
2140'
2489'
2680'
2863'
2912'
3127'
3428'
3610'
3814'
4029'
4231'
4375'
4740'

1/4
1/2
1/2
1/2
1/4
1
1 1/2
2 1/2
2 1/2
2 1/2
2 3/4
2 3/4
2 3/4
2 3/4
3
3
3 1/2
3 1/2
3 1/2
3 1/4