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FIELD OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PERORATION 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-111
Effective 1-1-65

I. OPERATOR

TEXACO Inc.

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

Reason(s) for filing (Check proper box)

Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Completion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Vacuum Grayburg San Andres Unit	Well No. 18	Pool Name, Including Formation Vacuum Grayburg San Andres	Kind of Lease State, Federal or Fee	Lease No. B-1306-1
Location Unit Letter K ; 1330 Feet From The South Line and 1330 Feet From The West				
Line of Section 1 Township 18S Range 34E , 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"/>	Address (Give address to which approved copy of this form is to be sent)
Texas New Mexico Pipe Line Co.	Box 1510, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
TEXACO Inc.	Box 728, Hobbs, New Mexico 88240
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	F 2 18S 34E Yes 1-23-73

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 12-18-72	Date Compl. Ready to Prod. 1-18-73	Total Depth 4800	P.B.T.D. 4788					
Elevations (DF, RKB, RT, GR, etc.) 3994 GR	Name of Producing Formation Vacuum Grayburg San Andres	Top Oil/Gas Pay 4311	Tubing Depth 4750					
Perforations 2 JSPI @4311, 31, 42, 47, 63, 73, 84, 4406, 14, 33, 40, 77, 81, 87, 95, 4500, 09, 22, 31, 44, 58, 69, 76, 80, 87, 92, 4618, 27, 32, 42, 48, 76, 98, 4702, 15, 28 & 4736'		Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD						
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		354		250 sk			
7-7/8"	5-1/2"		4,800		500 sk			

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)

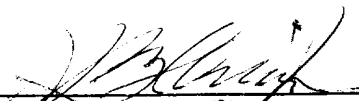
Date First New Oil Run To Tanks 1-18-73	Date of Test 1-23-73	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hrs.	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test	Oil-Bbls. 261	Water-Bbls. 28	Gas-MCF 502

GAS WELL

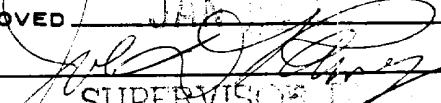
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.

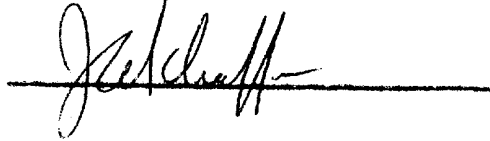

(Signature)
Assistant District Superintendent
(Title)
1-23-73
(Date)

OIL CONSERVATION COMMISSION

APPROVED  , 19
BY
TITLE **SUPERVISOR**


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

I, J. A. Schaffer, 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.



Subscribed and sworn to before me this 9th day of January, 1973.

My Commission expires February 24, 1973


B. F. Rohimer - Notary Public,
in and for Lea County,
State of New Mexico

Lease: New Mexico 'R' State NCT-3

Well No. 19

DEVIATION RECORD

<u>DEPTH</u>	<u>DEGREES OFF</u>
354	1/2
850	1/2
1340	3/4
1818	3/4
2250	1
2723	1
3154	2 1/4
3581	2 1/4
4098	2 1/2
4800 TD	2 1/4

11-15-64