

AND

## AL ORIZATION TO TRANSPORT OIL AND NATURAL GAS

FILE		
UNIT S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

Operator

TEXACO Inc.

Address

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

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 <b>Vacuum Grayburg San Andres Unit</b>	Well No. <b>14</b>	Pool Name, Including Formation <b>Andres Vacuum Grayburg San</b>	Kind of Lease <u>State</u> Federal or Fee	Lease No. <b>B-1189-1</b>
Location				
Unit Letter <b>K</b>	<b>1500</b>	Feet From The <b>South</b>	Line and <b>1500</b>	Feet From The <b>West</b>
Line of Section <b>2</b>	Township <b>18-S</b>	Range <b>34-E</b>	, NMPM, <b>Lea</b> 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)
<b>Texas-New Mexico Pipeline Co.</b>	<b>P. O. Box 1510, Midland, Texas 79701</b>
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)
<b>Phillips Petroleum Co.</b>	<b>P. O. Box 6666, Odessa, Texas 79760</b>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
<b>F 2 18-S 34-E</b>	<b>Yes 4-7-73</b>

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'v.	Diff. Res'v.
<b>X</b>	<b>X</b>							
Date Spudded <b>3-14-73</b>	Date Compl. Ready to Prod. <b>4-1-73</b>	Total Depth <b>4800'</b>	P.B.T.D. <b>4788'</b>					
Elevations (DF, RKB, RT, GR, etc.) <b>4014' GR</b>	Name of Producing Formation <b>Vacuum Grayburg San Andres</b>	Top Oil/Gas Pay <b>4512'</b>	Tubing Depth <b>4750'</b>					
Perforations <b>2 JSPT @ 4512, 20, 38, 47, 67, 79, 95, 4605, 12, 20, 43, 51, 78, 84, 95, 4704, 08, 30, 36, 42, 46, &amp; 4748'.</b>		Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<b>12 1/4"</b>	<b>8 5/8"</b>		<b>356</b>		<b>300</b>			
<b>7 7/8"</b>	<b>5 1/2"</b>		<b>4800</b>		<b>500</b>			

## 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 <b>4-1-73</b>	Date of Test <b>4-7-73</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Pump</b>	
Length of Test <b>24 hr.</b>	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test <b>72</b>	Oil - Bbls. <b>31</b>	Water - Bbls. <b>41</b>	Gas - MCF <b>64</b>

## 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.

Asst. Dist. Supt.

4-10-73

(Date)

## OIL CONSERVATION COMMISSION

APPROVED

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 only Sections I, II, III, and VI 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.

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.

  
J. A. Schaffer

Subscribed and sworn to before me this 27th day of March, 1973.

  
B. J. Hohimer - Notary Public,  
In and for Lea County, State of  
New Mexico.

My Commission expires 2-24-77

Lease Vacuum Grayburg San Andres Unit Well No. 14

DEVIATION RECORD

<u>DEPTH</u>	<u>DEGREES OFF</u>
356	3/4
830	3/4
1320	3/4
1750	3/4
2348	3/4
2830	1
3001	1-1/4
3447	1-3/4
3979	2
4218	2
4800 TD	1-3/4