

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

AND
A. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Effective 1-1-65

Operator TEXACO Inc.	
Address P. O. Box 728, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Vacuum	Well No. 46	Pool Name, Including Formation Vacuum Grayburg San Andres	Kind of Lease State, Federal or Fee	Lease No. B-144-1
Location				
Unit Letter H	1405	Feet From The North Line and 1230	Feet From The East	
Line of Section 2	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"/>	Address (Give address to which approved copy of this form is to be sent)	
Texas-New Mexico Pipeline Co.	P. O. 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)	
Phillips Petroleum Co.	P. O. Box 6666, Odessa, Texas 79760	
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 2
	Twp. 18-S	Rge. 34-E
	Is gas actually connected? Yes	When 3-12-73

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 <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 2-15-73	Date Compl. Ready to Prod. 3-7-73	Total Depth 4800'	P.B.T.D. 4788'					
Elevations (DF, RKB, RT, GR, etc.) 4010' GR	Name of Producing Formation Vacuum Grayburg San Andres	Top Oil/Gas Pay 4319'	Tubing Depth 4731'					
Perforations 2 JSPT @ 4319, 43, 55, 70, 80, 87, 4420, 25, 46		Depth Casing Shoe 80, 88, & 4697'						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/8"	CASING & TUBING SIZE 8 5/8"	DEPTH SET 356	SACKS CEMENT 300					
7 7/8"	5 1/2"	4800	500					

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)

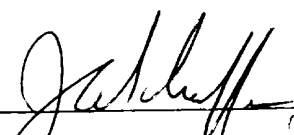
Date First New Oil Run To Tanks 3-7-73	Date of Test 3-12-73	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hr.	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 106	Oil - Bbls. 99	Water - Bbls. 7	Gas - MCF 226

GAS WELL

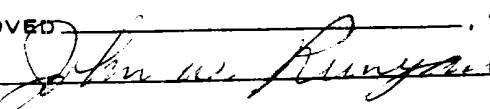
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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)
Asst. Dist. Supt.	(Title)
3-13-73	(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 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 2nd day of March, 1973.

My commission expires February 24, 1977

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

Lease - Vacuum Grayburg San Andres Unit Well No. 46

DEVIATION RECORD

<u>DEPTH</u>	<u>DEGREES OFF</u>
850	3/4
1,320	3/4
1,835	1
2,021	3/4
2,507	3/4
2,966	1-1/4
3,346	1-1/2
3,750	1-3/4
3,961	1-1/2
4,161	1-1/2
4,800 TD	1-1/2