	No. OF COPIES RECEIVED	_			
	CISTRIBUTION	NEW MEXICO OIL CO	ONSERVATION COMMISS	Form C-104	
	SANTA FE				
	FILE		1916	Supersedes Old C-104 and C-110 Effective 1-1-65 C. C. C.	
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	A3	
	LAND OFFICE		UEC 3	1 7 45 AN 165	
	RANSPORTER GAS	: -		·** ·** 0J	
	OPERATOR	! 			
1.	PROBATION OFFICE				
•	Sperator	*TEXACO Inc.			
	Aliress				
	P. O. Box 728 - Hobbs, New Mexico				
	Reason(s) for filing (Check proper box)  Other (Please explain)  *To change operator from Continental Oil				
	(few Well	Change in Transporter of:	Co to TEYACO	Inc., and to change	
	Hecom; letion Than re in Townership	Oil Dry Gas  Casinghead Gas Conden	Fore 3 ower open [	l number from State "H"	
_	Trail by III - Ward Shape	casingness das	34 to: **West V	Vacuum Unit #37.	
	If change of ownership give name and address of previous owner			transporter from	
	and address of previous owner			Texas-New Mexico Pipe	
11.	DESCRIPTION OF WELL AND	LEASE Well No   Pool Nar	Line Company.  me, Including Formation	Kind of Lease	
	Leane Mane **West Vacuum Unit		a cuum	State, Federal or Fee	
	Locution				
	Unit Letter P ; 4620	Feet From The North Line	e and 660 Feet From T	The East	
		17 9 _ 3	4-E NMPM	Lea County	
	Line of Section 34 , Tow	vnship 17-S Range 3	, NMPM,	Loa County	
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
	Name of Authorized Transporter of Oil		Address (Give address to which approv		
	***Texas-New Mexico Pip		P. O. Box 1510 - Midla  Address (Give address to which approx	ed copy of this form is to be sent)	
	Phillips Petroleum C		P. 0. Box 6666 - Odess		
	If well projuges of or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe		
	give location of tanks.	P 34 17-S 34-E	YES	N. A.	
		th that from any other lease or pool,	give commingling order number:		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Restv. Diff. Restv.	
	Designate Type of Completion	on = (X)			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	I col	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
		, , , , , , , , , , , , , , , , , , , ,			
	Perforations	Perforations Depth Casing Shoe			
		TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
v.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-	
	OIL WELL	. WELL able for this depth or be for full 24 hours)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Prow, pump, gas ti)	,,	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Pred. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF	
	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	resums Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
	resigning section (press, out is 1977)	Tubing Tressure	Casing Flobs are	Onexe Size	
V1.	CERTIFICATE OF COMPLIANCE	CE	OIL CONSERVA	TION COMMISSION	
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given				
			APPROVED , 19		
	above is true and complete to the	best of my knowledge and belief.	TITLE  This form is to be filed in compliance with RULE 1104.		
	, •				
	1777				
	777 0		If this is a request for allowable for a newly drilled or deepened		
	E.H. Scott (Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
	District Accountant	tle)	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.		
		366			
		ate)			