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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION 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-110
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 ☐	Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐	Casinghead Gas ☒ Condensate ☐
Change in Ownership ☐	
If change of ownership give name and address of previous owner	

II. DESCRIPTION OF WELL AND LEASE

Lease Name State of NM "0" NCT-1	Well No. 10	Pool Name, including Formation Vacuum	Kind of Lease State, Federal, or Fee	Lease No.
Location				
Unit Letter 0	660	Feet From The South	Line and 1980	Feet From The East
Line of Section 36	Township 17-S	Range 34-E	NMPM, Lea	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)			
Texas New Mexico Pipe Line Company	P. O. Box 7510 - Midland, Texas			
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)			
TEXACO Inc.	P. O. Box 728 - Hobbs, New Mexico			
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 2	Twp. 17-S	Rge. 34-E
Is gas actually connected? When	Yes December 19, 1967			

If this production is commingled with that from any other lease or pool, give commingling order number: 4TB-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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.E.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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)

New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, jet lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity or Condensate
Flowing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

AFFIDAVIT 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.

OIL CONSERVATION COMMISSION

APPROVED DEC 27 1967

TITLE