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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

I. Operator: **Texaco Inc.**
Address: **Drawer 728
Hobbs, N. M. 88240**

Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☐ Change in Transporter of: ☐ ***To change well number from 2406 to 27**
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name West Lovington Unit	Well No. *27	Pool Name, including Formation West Lovington	Kind of Lease State, Federal or Fee
Location Unit Letter N ; 660 Feet From The South Line and 1980 Feet From The West Line of Section 6 , Township 17-S Range 36-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"/> Texas New Mexico Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510 - Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Skelly Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1135 - Eunice, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 5	Twp. 17-S	Rge. 36-E	Is gas actually connected? Yes	When Unknown

If this production is commingled with that from any other lease or pool, give commingling order number:

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.B.T.D.		
Pool	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		

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	Date of Test	Producing Method (Flow, pump, gas 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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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.

J. G. BLEVINS, JR.
ASST. DIST. SUPT.

JUN 15 1965

(Signature)

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED: _____, 19 _____

BY _____

TITLE _____

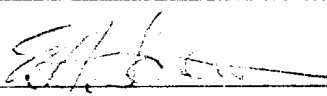
This form is to be filed in compliance with RULE 1104.

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 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.

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>																						NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		FORM C-110 (Rev. 7-60)
FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE																								
Company or Operator *TEXACO Inc.		Lease **West Lovington Unit	Well No. 2406																					
Unit Letter N	Section 6	Township 17-S	Range 36-E																					
Pool West Lovington		County Lea																						
If well produces oil or condensate give location of tanks		Unit Letter J	Section 5																					
		Township 17-S	Range 36-E																					
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 Company		PO Box 1510 - Midland, Texas																						
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>																								
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)																					
Skelly Oil Company		Unknown	PO Box 38 - Hobbs, New Mexico																					
If gas is not being sold, give reasons and also explain its present disposition:																								
REASON(S) FOR FILING (please check proper box)																								
New Well <input type="checkbox"/>		Change in Ownership <input type="checkbox"/>																						
Change in Transporter (check one)		Other (explain below)																						
Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>																								
Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/>																								
Remarks																								
*C-110 filed to change Company or Operator from Pan American Petroleum Corporation to TEXACO Inc., **to show well name change from State of NM "R" well No 1 to West Lovington Unit No 2406, new battery location, effective January 1, 1962.																								
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.																								
Executed this the <u>11</u> day of <u>January</u> , 19 <u>62</u>																								
OIL CONSERVATION COMMISSION		By																						
Approved by																								
Title		District Accountant																						
Date		Company																						
		TEXACO Inc.																						
		Address																						
		PO Box 728 - Hobbs, N. M.																						