Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico .gy, Minerals and Natural Resources Departme.

Form C-104 Revised 1-1-89 See Instruction at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III REQUEST FOR ALLOWABLE AND AUTHORIZATION 1000 Rio Brazos Rd., Aztec. NM 87410 TO TRANSPORT OIL AND NATURAL GAS Well API No Operator Texaco Exploration and Production Inc. 30 025 05411 Address Hobbs, New Mexico 88240-2528 P. O. Box 730 Reason(s) for Filing (Check proper box) X Other (Please explain) EFFECTIVE 6-1-91 Change in Transporter of: New Well Dry Gas Recompletion Casinghead Gas [Condensate X Change in Operator If change of operator give name and address of previous operator Texaco Producing Inc. P. 0. Box 730 Hobbs, New Mexico 88240-2528 II. DESCRIPTION OF WELL AND LEASE Kind of Lease State, Federal or Fee FEE Well No. Pool Name, Including Formation Lease No. Lease Name 114010 LOVINGTON GRAYBURG SAN ANDRES (CAYLOR C. S. Location Feet From The EAST Feet From The NORTH Line and 2173· 2179 G Line Range 37E 175 LEA County . NMPM. Township Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil Texas New Mexico Pipeline Co. or Condensate 1670 Broadway Denver, Colorado 80202 Name of Authorized Transporter of Casinghead Case Company Gas Address (Give address to which approved copy of this form is to be sent) 990G Plaza Office Bldg. Bartlesville, Oklahoma 74004 Phillips 66 Natural Gas Co. GPM Gas Corporation . is gas actually connected? Rge. When? Twp If well produces oil or liquids, **UNKNOWN** G 175 | 37E 6 YES If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Diff Res'v Oil Well Gas Well New Well Workover | Deepen | Plug Back | Same Res'v Designate Type of Completion - (X) Date Compl. Ready to Prod. P.B.T.D. Date Spudded Top Oil/Gas Pay Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Depth Casing Shoe Perforations TUBING, CASING AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE **DEPTH SET** HOLE SIZE 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.) Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tank Date of Test Choke Size Casing Pressure Length of Test Tubing Pressure Gas- MCF Water - Bbls. Actual Prod. During Test Oil - Bbls. **GAS WELL** Gravity of Condensate Rbls. Condensate/MMCF Actual Prod. Test - MCF/D Length of Test Choke Size Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) VL OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Date Approved . Fau. Kautz Geologist Signature Div. Opers. Engr.

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

K. M. Miller

April 25, 1991

Printed Name

Date

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title_

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Title

915-688-4834

Telephone No.

- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.