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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

JUN 6 4 20 AM '69

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator

Address **TEXACO Inc.**
P. O. Box 728 Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☒ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain) **Well recompleted in Wolfcamp zone.**

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name N. M. "0" St. NCT-1	Well No. 17	Pool Name, Including Formation Vacuum (Wolfcamp)	Kind of Lease State, Federal or Fee	Lease No. B-155-1
Location Unit Letter N ; 760 Feet From The South Line and 2080 Feet From The West 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 <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas-New Mexico Pipe Line Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510 Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> TEXACO Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 728 Hobbs, New Mexico 88240					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 36	Twp. 17-S	Rge. 34-E	Is gas actually connected? Yes	When 6-5-69

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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X			X				X
Date Spudded March 14, 1963	Date Compl. Ready to Prod. May 22, 1963		Total Depth 12,083'		P.B.T.D. 10,932'			
Elevations (DF, RKB, RT, GR, etc.) 4008' (DF)	Name of Producing Formation Vacuum (Wolfcamp)		Top Oil/Gas Pay 9962'		Tubing Depth 12,070'			
Perforations Perforate w/2 JSPF from 9962' to 9972', 9972' to 10,004', 10,025' to 10,029'.					Depth Casing Shoe 12,070'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8" 48#	1612	1200
12-1/4"	9-5/8" 36#	4750	17000
8-3/4"	3-1/2" 9.20#	12070	3 strings cemented
8-3/4"	2-7/8" 6.40#	10952	w/1325 sacks
8-3/4"	2-7/8" 6.40#	10952	

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 June 5, 1969	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 48	Oil - Bbls. 48	Water - Bbls. 0	Gas - MCF TSTM

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)
Assistant District Superintendent
(Title)

June 6, 1969

(Date)

OIL CONSERVATION COMMISSION

APPROVED **JUN 6 1969**, 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.