	NO. OF COPIES RECEIVED			
	DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMIS	Form C-104
	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
	FILE	_	AND	9 6
	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL (
	LAND OFFICE		UEP 27 2	11 M'66
	[RANSPORTER GAS		to have	711 00
	OPERATOR			
	PRORATION OFFICE			
	Cperator			
	TEXACO Inc.			
	Address			
	P. O. Box 728 - Hobbs, New Mexico			
	Reason(s) for filing (Check proper box) Other (Please explain)			
	New Well Change in Transporter of:			
	Recompletion Oil Dry Gas			
	Change in Ownership Casinghead Gas Condensate			
	If change of ownership give name			
	and address of previous owner			
••	DESCRIPTION OF WELL AND			
11.	DESCRIPTION OF WELL AND Lease Name	Well No. Pool No.	ame, Including Formation	Kind of Lease
	N. M. "DE" State	l I	idway Abo	State, Federal or Fee
	Location			- Carrier of Tee
	C 190	2 West	ne and 660 Feet From	North
			ne and Feet From	The
	Line of Section 18	wnship 17-S Range	37-E , _{NMPM} ,	Lea County
		, and	7.7011 1017	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 the			ved copy of this form is to be sent)
	Texas New Mexico Pip		P. O. Box 1510 - 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)	
	Vented (TO BE CONNECTED LATER)			
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	en
	give location of tanks.	E 18 17-S 37-E	NO	
	If this production is commingled with that from any other lease or pool, give commingling order number:			
IV.	COMPLETION DATA			110
	Designate Type of Completic	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
		, OIL NO	NEW NEW NEW	NEW NEW NEW
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	July 8, 1966	-	89251	8891
	Midway Abo	Name of Producing Formation Midway Abo	Top Oil/908 Pay 8853!	Tubing Depth
	-	,,	,	88301
	Perforations Perforate 4 1/2" Casing with two jet shots at 8853', 8855', Depth Casing Shoe 8858', 8861', 8863', 8866', 8869', 8874', 8881', 8884', 8893', & 8896', 8925'			
	TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	15"	11 3/4"	354*	300 Sx.
	10 5/8"	8 5/8"	44001	1600 Sx.
	7 7/8"	lı 1/2"	89251	1300 Sx.
		4 1/2	0,72,7	1300 5x.
V.	TEST DATA AND REQUEST FO	OR ALLOWARIE (Test must be a	fter recovery of total volume of load oil of	and must be social to an arrange of the state of the stat
	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)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas life	t, etc.)
	September 1, 1966	September 27, 1966	Pump	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	24 Hours	Pump	Pump	Pump
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas-MCF
	_ 5	5	NONE	9.5
	CAS WELL			
٢	GAS WELL Actual Prod. Test-MCF/D	Length of Test		
	Actual Flod: Test-Mel/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
-	Testing Method (pitot, back pr.)	Tubba Decome		
	resting Method (pitot, odek pr.)	Tubing Pressure	Casing Pressure	Choke Size
ا				
	CERTIFICATE OF COMPLIANCE		OIL CONSERVA	TION COMMISSION
			APPROVED SED 25 19	
	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.			
i			BY OVIGINAL & THREE COPIES	
			See MARY FALO F. INGRESCHO	
			TITLE SNGINGER DISTRICT No. 1	
	11/2 4/2/200		This form is to be filed in compliance with RULE 1104.	
_	Way fel lolf		If this is a request for allowable for a newly drilled or deepened	
	Dan Gillett' (Signature)		well, this form must be accompanied by a tabulation of the deviation	
Ä	Assistant District Superintendent		tests taken on the well in accordance with RULE 111.	
	(Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.	
Š	September 27, 1966		Fill out Sections I, II, III, and VI only for changes of owner,	
	(Dai	· • /	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.	
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