

FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

AND
A HORIZATION TO TRANSPORT OIL AND TURAL GAS

Effective 1-1-65

Operator TEXACO Inc.	
Address P. O. Box 728, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico 'DK' St. Com	Well No. 1	Pool Name, Including Formation Vacuum Morrow, North Gas	Kind of Lease State, Federal or Fee	Lease No. A-1746 B-1518 B-1527 K-6023
Location Unit Letter F ; 1980 Feet From The North Line and 1904 Feet From The West				
Line of Section 18 Township 17-S Range 35-E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Mobil Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P.O. 900, Dallas, Texas 75221	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Northern Natural Gas	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3316, Midland, Texas 79701	
If well produces oil or liquids, give location of tanks.	Unit F Sec. 18 Twp. 17 Rge. 35	Is gas actually connected? Yes When 6 7-12-73

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.
		X	X					
Date Spudded 3-10-72	Date Compl. Ready to Prod. 5-7-72	Total Depth 12,500		P.B.T.D. -				
Elevations (DF, RKB, RT, GR, etc.) 4001' GR	Produced on Vacuum Morrow, North Gas		Top Oil/Gas Pay 11,485		Tubing Depth 11,410			
Perforations 2 JSPP @ 11,485-11,495', 11,720-11,744', 11,804-11,814 & 11,842-11,856'				Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 17 1/2"	CASING & TUBING SIZE 13 3/8"	DEPTH SET 375'		SACKS CEMENT 400 SX				
11"	8 5/8"	4954'		1050 SX.				
7 7/8"	4 1/2"	12,500'		1350 SX.				

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 5-12-73

Actual Prod. Test-MCF/D AOP 4121	Length of Test 4 hrs.	Bbls. Condensate/MMCF 16	Gravity of Condensate 43.2
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 3551	Casing Pressure (shut-in) -	Choke Size 10/64

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.


Assistant District Superintendent
7-12-73
(Date)

OIL CONSERVATION COMMISSION

APPROVED

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.