

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
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U.S.A.	
LAND OFFICE	
TRANSPORTER	☐ OIL ☐ GAS
OPERATOR	
PROMOTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Texaco Producing Inc.

Address P.O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

☒ New Well	Change in Transporter of:	☐ Dry Gas
☐ Recompletion	☐ Oil	☐ Condensate
☐ Change in Ownership	☐ Casinghead Gas	

Other (Please explain) _____

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Central Vacuum Unit</u>	Well No. <u>253</u>	Pool Name, including Formation <u>Vacuum Grayburg San Andres</u>	Kind of Lease <u>State, Federal or Fee State</u>	Lease No. <u>B-1565</u>
Location				
Unit Letter <u>C</u> : <u>675</u> Feet From The <u>North</u> Line and <u>1330</u> Feet From The <u>West</u>				
Line of Section <u>36</u> Township <u>17-S</u> Range <u>34-E</u> , N.M.P.M. <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ <u>Texas New Mexico Pipeline Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 2528 Hobbs NM 88240</u>
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ <u>Phillips 66 Natural Gas Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Penbrook Odessa TX 79762</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. In gas actually connected? When
<u>E</u> <u>31</u> <u>17-S</u> <u>35-E</u>	<u>Yes</u> <u>3-4-88</u>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

P.W. Munchert
For A. Gernandt (Signature)
Area Superintendent
(Title)
4-6-88
(Date)

OIL CONSERVATION DIVISION

APPROVED APR 13 1988, 19____

BY ORIGINAL SIGNED BY JERRY SEXTON

TITLE DISTRICT 1 SUPERVISOR

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.

IV. COMPLETION DATA

WELL COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Dill. Res't.
		X		X					
Date Spudded	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.		
2-14-88	3-4-88			4720'			4720'		
Elevation (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
4018' KB	Grayburg San Andres			4325'			4681'		
Options							Depth Casing Shoe		
Open hole 4325' - 4720'							4325'		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
24"	20" 94*	360	850
17-1/2"	13-3/8" 54.5*	1570	1600
12 1/4 - 8 3/4"	7" 23*	4325	2050
6-1/8"	open hole	4325 - 4720	

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 3-4-88	Date of Test 3-13-88	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 431	Oil - Bbls. 105	Water - Bbls. 326	Gas - MCF 77.7

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Producing Method (plug, back pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Choke Size