

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

I.

Operator Texaco Producing Inc.	Well API No. 30-025-30714
Address P.O. Box 730, Hobbs, NM 88240	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico "O" State NCT-1	Well No. 31	Pool Name, Including Formation Vacuum Glorieta	Kind of Lease State, Federal or Fee	Lease No. 548570
Location				
Unit Letter F	1980	Feet From The West	Line and 2310	Feet From The North
Section 36	Township 17S	Range 34E	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 Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, NM 88240					
Name of Authorized Transporter of Casinghead Gas <input checked="" 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 730, Hobbs, NM 88240					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 36	Twp. 17S	Rge. 34E	Is gas actually connected? Yes	When? 02-17-90

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 01-29-90	Date Compl. Ready to Prod. 02-17-90		Total Depth 6260'		P.B.T.D. 6225'			
Elevations (DF, RKB, RT, GR, etc.) GR 4002' KB 4015'	Name of Producing Formation Vacuum Glorieta		Top Oil/Gas Pay 6103'		Tubing Depth 6140'			
Perforations 6103-6135' 2 JSPF, 64 holes					Depth Casing Shoe 6260'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
14-3/4"	11-3/4"		1550'		1300 sx "H" Cir 218			
11"	8-5/8"		3000'		900 sx "H" Cir 234			
7-7/8"	5-1/2"		6260'		1125 sx "H" Cir 250			

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 Tank 02-18-90	Date of Test 02-20-90	Producing Method (Flow, pump, gas lift, etc.) Pumping 2-1/2" X 1-1/2" X 20'	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 142	Water - Bbls. 34	Gas - MCF 133

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Signature
J. A. Head
Area Manager
Printed Name
March 27, 1990
Date
(505) 393-7191
Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 11 1990

By APPROVED

Title APPROVED

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

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 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.