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1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

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

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

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

I.

Operator Texaco Producing Inc.	Well API No. 30-025-30715
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 State "BA"	Well No. 11	Pool Name, Including Formation Vacuum Glorieta	Kind of Lease State, Federal or Fee	Lease No. 744880
Location Unit Letter <u>D</u> : <u>989</u> Feet From The <u>West</u> Line and <u>660</u> Feet From The <u>North</u> Line Section <u>36</u> Township <u>17-S</u> Range <u>34-E</u> , <u>NMPM</u> , <u>Lea</u> 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. (0095-0567)	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"/> Phillips 66 Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX 79762
If well produces oil or liquids, give location of tanks.	Unit <u>C</u> Sec. <u>36</u> Twp. <u>17S</u> Rge. <u>34E</u>
Is gas actually connected?	When ? Yes 06-23-65

If this production is commingled with that from any other lease or pool, give commingling order number: PC-147

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 11-20-89	Date Compl. Ready to Prod. 01-17-90	Total Depth 6600'	P.B.T.D. 6230'					
Elevations (DF, RKB, RT, GR, etc.) GR 4006', KB 4019'	Name of Producing Formation Glorieta	Top Oil/Gas Pay 5967'	Tubing Depth 6008'					
Perforations 5967-5993', 2 JSPF, 27', 54 holes 6101-6146', 2 JSPF, 46', 90 holes	Depth Casing Shoe 6600'							

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
14-3/4"	11-3/4" 42#	1555'	1300-H Cir 207 sx
11"	8-5/8" 32#	3000'	750-H Cir 18 sx
7-7/8"	5-1/2" 15.5#	6600'	1st 330-H Cir 33 sx
		DV @ 4978'	2nd 875-H Cir 185 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 Tank 12-29-89	Date of Test 01-23-90	Producing Method (Flow, pump, gas lift, etc.) Pumping 2-1/2 X 1-1/2 X 24
Length of Test 24	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls. 40	Water - Bbls. 17
		Gas - MCF 107

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.

J. A. Head / PSP
Signature
J. A. Head Area Manager
Printed Name
01/30/90 (505) 393-7191
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 6 1990
By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
Title _____

- 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.