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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION P.O. Box 2088

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

|  |  | 10 /11/2                          | 11101 C       | / TT O                      | C AND NA                                      | I UNAL G        | A3           |                       |                 |            |  |
|--|--|-----------------------------------|---------------|-----------------------------|---|-----------------|--------------|-----------------------|-----------------|------------|--|
| Operator   |  |                                   |               |                             |   |                 | Wel          | API No.               |                 |            |  |
| Texaco Producing Inc.  |  |                                   |               |                             |   |                 | 30-025-30969 |                       |                 |            |  |
| Address  |  |                                   |               |                             |   |                 |              |                       |                 |            |  |
| P.O. Box 730, Hobbs,   | NM 88  | 240                               |               |                             |   |                 |              |                       |                 |            |  |
| Reason(s) for Filing (Check proper box)  | Other (Please explain)   |                                   |               |                             |   |                 |              |                       |                 |            |  |
| New Well XX  |  | Change in                         | •             |                             |   |                 |              |                       |                 |            |  |
| Recompletion   | Oil  |                                   | Dry Gas       |                             |   |                 |              |                       |                 |            |  |
| Change in Operator   | Casinghea  | d Gas                             | Condens       | ate                         |   |                 |              |                       |                 |            |  |
| If change of operator give name and address of previous operator   |  |                                   |               |                             |   |                 |              |                       |                 |            |  |
| II. DESCRIPTION OF WELL  | AND LEA  | ASE                               |               | ·                           |   |                 |              |                       |                 |            |  |
| Lease Name New Mexico "O"  | ing Formation  |                                   |               |                             |   | ease No.        |              |                       |                 |            |  |
| NCT-1  | orieta   |                                   |               | tate, Federal or Fee 548570 |   | 70              |              |                       |                 |            |  |
| ŭ  | 2.   | 210                               |               |                             | M + 1   | 0.0             | 0            |                       | _               |            |  |
| Unit LetterH   | _ :2   | 310                               | Feet From     | m The                       | North Lin                                     | e and99         | 1            | eet From The          | East            | Line       |  |
| Section 36 Townshi   | 3  |                                   |               | -                           |   |                 |              |                       |                 |            |  |
| Section 36 Townshi   | p 175  |                                   | Range         | 34E                         | L , NI  | MPM,            |              | Lea                   |                 | County     |  |
| III. DESIGNATION OF TRAN   | SPORTE   |                                   |               | NATU                        |   |                 |              |                       |                 |            |  |
| Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be see |  |                                   |               |                             |   |                 |              |                       |                 | ent)       |  |
| Texas New Mexico Pipe  | as 🗍   | P.O. Box 2528, Hobbs, NM 88240    |               |                             |   |                 |              |                       |                 |            |  |
| Name of Authorized Transporter of Casing   | Address (Give address to which approved copy of this form is to be sent) |                                   |               |                             |   |                 |              |                       |                 |            |  |
| Texaco Producing Inc.  |  | P.O. Box 425, Lovington, NM 88260 |               |                             |   |                 |              |                       |                 |            |  |
| If well produces oil or liquids,   |  |                                   |               |                             | is gas actually                               |                 | Whe          |                       | •               |            |  |
|  | 101  | 36                                | 17S           | 34E                         | Ye  |                 |              | 03-07                 | <del>/-91</del> |            |  |
| f this production is commingled with that it.  IV. COMPLETION DATA   | from any oth   | er lease or p                     | pool, give    | commingl                    | ing order numb                                | er:             |              |                       |                 |            |  |
|  |  | Oil Well                          | Ga            | s Well                      | New Well                                      | Workover        | Deepen       | Plug Back             | Same Res'v      | Diff Res'v |  |
| Designate Type of Completion   | - (X)  | X                                 | i             |                             | 1 X 1   | l Worker        | Despet       | 1 ring back           | l Parile Kez A  | pili kesv  |  |
| Date Spudded   | Date Compi. Ready to Prod.   |                                   |               | Total Depth                 |   |                 | P.B.T.D.     | l                     | _1              |            |  |
| 12-14-90   | 03-07-91   |                                   |               |                             | 6300'   |                 |              | 6000'                 |                 |            |  |
| Elevations (DF, RKB, RT, GR, etc.)   | Name of Producing Formation  |                                   |               |                             | Top Oil/Gas Pay                               |                 |              | Tubing Depth          |                 |            |  |
| GR-3995', KB-4008'   | Vacuum Glorieta  |                                   |               |                             | 5892'   |                 |              | 5954'                 |                 |            |  |
| Perforations   |  |                                   |               |                             |   |                 |              | Depth Casing Shoe     |                 |            |  |
| 5892-5974' 56 holes,   | 6012-60  | )40 <b>'</b> 42                   | 2 hole        | es. 61                      | 59-62321                                      | 78 hol          | es           |                       | <b>6</b>        |            |  |
| 5892-5974' 56 holes, 6012-6040' 42 holes, 6159-6232' 78 holes  TUBING, CASING AND CEMENTING RECORD                         |  |                                   |               |                             |   |                 |              |                       |                 |            |  |
| HOLE SIZE  | CASING & TUBING SIZE   |                                   |               |                             | DEPTH SET                                     |                 |              | SACKS CEMENT          |                 |            |  |
| 15''   | 11-3/4"  |                                   |               |                             | <del>2550</del> '1550                         |                 |              | 1200 sx Cir 142       |                 |            |  |
| 11"  | 8-5/8"   |                                   |               |                             | 3000'   |                 |              | 850 sx Cir 158        |                 |            |  |
| 7-7/8"   | 5-1/2"   |                                   |               |                             | 6300'   |                 |              | 1230 sx Cir 120       |                 |            |  |
|  |  |                                   |               |                             |   |                 |              | DV Tool @ 5000'       |                 |            |  |
| . TEST DATA AND REQUES   |  |                                   |               |                             |   |                 |              |                       |                 |            |  |
| OIL WELL (Test must be after re  | covery of low  | al volume o                       | of load oil   | cod must                    | be equal to or t                              | exceed top allo | wable for th | is depth or be f      | or full 24 how  | ·3.)       |  |
| e First New Oil Run To Tank Date of Test   |  |                                   |               |                             | Producing Method (Flow, pump, gas lift, etc.) |                 |              |                       |                 |            |  |
| 01-12-91   | 03-16-91   |                                   |               |                             | Pumpin  | g 2.5"          | X 1.5"       |                       |                 |            |  |
| length of Test   | Tubing Pressure  |                                   |               |                             | Casing Pressure                               |                 |              | Choke Size            |                 |            |  |
| 24 hr.   |  |                                   |               |                             |   |                 |              |                       |                 |            |  |
| Actual Prod. During Test   | Oil - Bbls.  |                                   |               |                             | Water - Bbis.                                 |                 |              | Gas- MCF              |                 |            |  |
|  | 15   |                                   |               | 62                          |   |                 | 35           |                       |                 |            |  |
| GAS WELL   |  |                                   |               |                             |   |                 |              |                       |                 |            |  |
| Actual Prod. Test - MCF/D  | Length of Test   |                                   |               |                             | Bbls. Condensate/MMCF                         |                 |              | Gravity of Condensate |                 |            |  |
|  |  |                                   |               |                             |   |                 |              |                       |                 |            |  |
| esting Method (pilot, back pr.)  | Tubing Pressure (Shut-in)  |                                   |               |                             | Casing Pressure (Shut-in)                     |                 |              | Choke Size            | <del></del>     |            |  |
|  |  |                                   |               |                             |   |                 |              |                       |                 | į          |  |
| /I OPERATOR CO.  | . J Circi  | Chiver                            | ANC           | 'F                          |   |                 |              |                       |                 |            |  |
| VI. OPERATOR CERTAIN INFAME OF CONTENTANCE  I hereby certify that the rules and regulations of the Oil Conservation        |  |                                   |               |                             |   | IL CON          | SERV         | ATION [               | DIVISIO         | Ν          |  |
| Division have been complied with and that the information given above  |  |                                   |               |                             |   |                 |              | # .m                  |                 |            |  |
| is true and complete to the best of my knowledge and belief.   |  |                                   |               |                             | Date Approved                                 |                 |              |                       |                 |            |  |
| $O \setminus I \cap A \setminus I$   |  |                                   |               |                             | Date.   | whhtoned        | د            | 2 EK 63 33            |                 |            |  |
| Kichard Medoto   |  |                                   |               |                             | _   | . ,             |              |                       | 1.4             |            |  |
| Signature R. B. DeSoto Engineering Technician  |  |                                   |               |                             | Ву  |                 | <del></del>  |                       |                 |            |  |
|  |  |                                   |               |                             |   |                 |              |                       |                 |            |  |
| Printed Name<br>04/04/91   | (505   |                                   | Tide<br>-7191 |                             | Title_  |                 |              |                       |                 |            |  |
| Date   | (00)   |                                   | hone No.      |                             |   |                 |              |                       |                 |            |  |
|  |  | . отора                           |               |                             |   |                 |              |                       |                 |            |  |

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.