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## State of New Mexico

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

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

Texaco Producing Inc.	I.		TO TF	RANSI	PORT	OIL AND N	ATURAL (	GAS	J. <b>.</b>				
Address   Post	Operator	<u> </u>							Well API No.				
PO BOX 728, HOBDS, New Mexico 88240   Change in Transporter of   Change i		Inc.				·							
Reaccing   Check proper bod    Change in Transporter of   Obor (Please explains)   New Well   Change in Openic give some   Oil		s Now Ma	vico	QQ2/IC	1								
New Wild	Reason(s) for Filing (Check prope	bax)	XICO	00240	<u></u>		then /Blaces and						
Recomplication   Califorms   Day Condemns		· · · · · · · · · · · · · · · · · · ·	Change	in Trans	porter of:		unce (Please ex	plaun)					
If change of openion give states and defarred openior appraised.  I. DESCRIPTION OF WELL AND LEASE  Least Name  J. R. Phillips  11 Power of the Composition of the C	· · =	Oil	Ī			j	_						
TUBING, CASING AND CEMENTION OF WELL AND LEASE  Lase Name  J. R. Phillips  Well No.  Pool Name, Incheding Formation  (Prorated Gas)  Responsible from the Mode Ellenburger  Wand of Lease  Lase No.  Responsible from the Mode Ellenburger  Wand of Lease  Lase No.  Responsible from the Mode Ellenburger  Wand of Lease  Lase No.  Responsible from the Mode Ellenburger  Wand of Lease  (Prorated Gas)  North Line and 738 Feet From the MeSt Line  Responsible from the North Line and 738 Feet From the MeSt Line  Responsible from the North Line and 738 Feet From the MeSt Line  Responsible from the North Line and 738 Feet From the MeSt Line  Responsible from the North Line and 738 Feet From the MeSt Line  Responsible from the North Line and 738 Feet From the MeSt Line  Responsible from the North Line and 738 Feet From the MeSt Line  Responsible from the North Line and 738 Feet From the MeSt Line  Responsible from the North Line and 738 Feet From the MeSt Line  Responsible from the North Line and 738 Feet From the MeSt Line  Responsible from the North Line and 738 Feet From the MeSt Line  Responsible from the Section of Condensates  Address (Give address to which approved copy of this form is to be seen)  Wall from Post Condensates  Name of Autoboard Transporter of the Importance of Door Dy Case (Time address to which approved copy of this form is to be seen)  Wall from production of Importance of the Importance of Door Dy Case (Time address to which approved copy of this form is to be seen)  Wall from production of Importance of Condensates  V. COMPLETION DATA  Designate Type of Completion - (X)  Designate Type of Completion - (X)  Designate Type of Completion - (X)  Date Compt. Resdy to Prod.  Total Depth  P.B.T.D.  Tubing Depth  Tubing Depth of Test  Tubing Pressure  Casing Pressure  Oncore Size  Depth Ca		Casingt	nead Gas	Cond	ensate [		_						
IL DESCRIPTION OF WELL AND LEASE  Lease Name  1. R. Phillips  1. R. R. Phillips  1. R. Phillips  1. R. Phillips  1. R. R. Phillips  1. R. Phillips  1. R. Phillips  1. R. R. Phillips  1. R. R. R. Phillips  1. R. R. Phillips  1. R. R. Phillips  1. R. R. Ph	If change of operator give name and address of previous operator								<del></del>				
Lease Name   Lase Name   Las	•						<del></del>			<del></del>			
J. R. Phillips		ELL AND L		Doel 1									
Location   Line   Lin	1	1 D Dhilling								Face	Lease No.		
Unit Later D 736 Fost Prom The North Ime and 738 Fost From The Low Section 6 Township 20S Range 37E NORTH Ime and 738 Fost From The Low County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil O Authorized Transporter of Canagheed Gas O or Condensuate Authorized Transporter of Canagheed Gas O or Ory Gas IX Address (Give address to which approved copy of that form is to be seen)  Name of Authorized Transporter of Canagheed Gas O or Ory Gas IX Address (Give address to which approved copy of that form is to be seen)  Name of Authorized Transporter of Canagheed Gas O or Ory Gas IX Address (Give address to which approved copy of that form is to be seen)  Name of Authorized Transporter of Canagheed Gas O or Ory Gas IX Address (Give address to which approved copy of that form is to be seen)  Name of Authorized Transporter of Canagheed Gas O or Ory Gas IX Address (Give address to which approved copy of that form is to be seen)  Name of Authorized Transporter of Canagheed Gas O or Ory Gas IX Address (Give address to which approved copy of that form is to be seen)  Name of Authorized Transporter of Canagheed Gas O or Ory Gas IX Address (Give address (Gi		···		1 110				ier		-	<del></del>		
Section 6 Township 20S Range 37E NoTPM, Lea County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil Of Condenses    Address (Give address to whick approved copy of the form is to be sent)	Unit LetterD	•	736	Foot E	in The	North ,	738	3		West			
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West produces oil or liquids,   Discounty   Sec.   Twp.   20S   37 Ex.   Is gas acausity connected?   When 7 Condenses of the produces oil or liquids,   Discounty   Sec.   Twp.   Twp	Name of Authorized Transporter of Casinghead Gas or Dry Gas T					Address (Give address to which approved come of this form in to be							
If well produces all or liquids, but the from any other lease or pool, give communiquing order sumber:  V. COMPLETION DATA  Designate Type of Completion - (X)  Oil Well Gas Well New Well Workover Deepen Plug Back Same Rei'v Diff Rei'v Designate Type of Completion - (X)  Date Spatisfied  Date Compl. Ready to Prod.  Designate Type of Completion - (X)  Oil Well Gas Well New Well Workover Deepen Plug Back Same Rei'v Diff Rei'v Designate Type of Completion - (X)  Designate Type of Completion - (X)  Date Compl. Ready to Prod.  Designate Type of Completion - (X)  Date Compl. Ready to Prod.  Date Spatisfied  Date Compl. Ready to Prod.  Date Spatisfied  Date Completion - (X)  Date Completion - (X)  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  TEST DATA AND REQUEST FOR ALLOWABLE  IL WELL  (It at must be ghor 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.)  TEST DATA AND REQUEST FOR ALLOWABLE  IL WELL  (It at must be ghor 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.)  The First New Oil Rue To Tank  Date of Test  Date Only Date of Test  Date of Test  Date of Test  Date Condensate/MMCF  Oravity of Condensate  Oil - Bbis.  Oil - Bbis.  Oil CONSERVATION DIVISION  Date Approved  By  ORICINAL SIGNED BY JERRY SEXTON  DISTRICT: SUPERVISOR  Title  Title		Corporatio	on						a, Oklahoma 74102				
This production is commingled with that from any other lease or pool, give commingling order sampler:  V. COMPLETION DATA  Designate Type of Completion - (X)  Oil Well Cas Well New Well Workover Deepen Plug Back Same Reav Diff Reav Date Spatisfied  Date Compl. Ready to Prod.  Total Depth PB.T.D.  Designate Type of Completion - (X)  Oil Well Cas Well New Well Workover Deepen Plug Back Same Reav Diff Reav Date Spatisfied  Date Completion - (X)  Date Completion - (X)  Name of Producing Formation  Top Oil/Gas Phy Tubing Depth  PB.T.D.  Tubing Depth  PB.T.D.  Tubing Depth  Tubing Depth  Tubing Casing And Cementing Record  HOLE SIZE CASING A TUBING SIZE DEPTH SET SACKS CEMENT  TEST DATA AND REQUEST FOR ALLOWABLE  IL WELL (fest must be sthe 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)  Its First New Oil Rus To Task Date of Test Producing Method (Flow, pump, gut (ft, etc.))  The First New Oil Rus To Task Date of Test Date of the City Conservation  Designate Type of Completion - (X)  Water - Bbis. Gas-MCF  Casing Pressure (Shut-is)  Choke Size  Oil - Conservation Division have been compiled with and that the information given above to the nate and regulations of the Cit Conservation Division have been compiled with and that the information given above to the nation of the best of my knowledge and belief.  Date Approved  By Oricinal Signed Ry Jerry Sexton  District : Supervisor  Title  Title					27 Rge	ls gas actually connected?			When ?				
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Descriptions (DF, RKB, RT, GR, etc.)  Name of Producing Formation  Top Oli/Gas Pay  Tubing Depth  Tubing Depth  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  TEST DATA AND REQUEST FOR ALLOWABLE  IL WELL  (Test must be give recovery of total volume of food oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)  THE FIRST DATA AND REQUEST FOR ALLOWABLE  IL WELL  (Test must be give recovery of total volume of food oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)  The First New Oil Run To Trank  Date of Test  Tubing Pressure  Casing Pressure  Choice Size  Water - Bbla  Gas- MCF  AS WELL  Tubing Pressure (Shut-in)  Caning Pressure (Shut-in)  Conce Size  UIL CONSERVATION DIVISION DIVISION DIVISION DIVISION DIVISION DIVISION DATE STRICT: FUPERVISOR  Title  Title  Title  Title  Title  Title  Title			Oil Well	10	as Well	New Well	Workover	Deene	Ding Back	C   D	b.~ n		
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OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Cil Conservation Division have been complied with and that the information given above as true and complete to the best of my knowledge and belief.  Date Approved  By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT SUPERVISOR Title T-24-89  397-3571  Title  Title	ion Mathed (-inst back	Tubin D											
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Telephone No.						1100							
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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.