

NEW MEXICO OIL CORPORATION FORM NO. 1		Form C-104 Superseding OIL C-101 and C-102 Effective 1-1-65
REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
DATE RECEIVED		
DISTRICT		
SURVEY		
FILE		
DATE		
LAND OFFICE		
TRANSPORTER	OIL GAS	
OPERATOR		
PRODUCTION OFFICE		

TXO Production Corp.

Address
900 Wilco Bldg. Midland, TX. 79701

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	effective May 1, 1988
Recompletion ☐	
Change in Ownership ☐	
Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☒	

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

DESCRIPTION OF WELL AND LEASE

Lease Name Jordan "B"	Well No. 2	Pool Name, including Formation Lea Wildcat (Wolfcamp)	Kind of Lease State, Federal or Fee Fee	Lease No.
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Location
Unit Letter G ; 1980 Feet From The North Line and 2310 Feet From The East _____

Line of Section 11 Township 20-S Range 35-E , NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
Scurlock Oil Company	511 W. Ohio Suite 303 Midland, TX. 79701
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum 66 Natl Gas	Phillips Bldg. Bartlesville, OK. 74004
If well produces oil or liquids, give location of tanks.	Unit Soc. Twp. Rge. Is gas actually connected? When
G 11 20-S 35-E	

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Stim. Treat.	Perf. Test
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.D.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Testing Depth					
Perforations			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lead 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Testing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-DBls.	Water-DBls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	DBls. Condensate/MCF	Gravity of Condensate
Testing Method (flow, back pr.)	Testing Pressure (lbwt-in)	Casing Pressure (lbwt-in)	Choke Size

CERTIFICATE OF COMPLIANCE	OIL CONSERVATION COMMISSION
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	APPROVED <u>APR 15 1988</u> , 19
	Orig. Signed by <u>Paul Kautz</u>
	BY <u>Geologist</u>
	TITLE _____
<u>Julia Collier</u> Julia Collier (Signature) Engineer Asst. (Title) 4-12-88 (Date)	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or recomple well, this form must be accompanied by a tabulation of the gravity tests taken on the well in accordance with RULE 111. All portions of this form must be filled out completely for all applicable new and recomple 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 conditions.