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

DISTRICT II
P.O. Drawer 17D, Artesia, NM 88210

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

State of New Mexico
Enr 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**

Operator Texaco Exploration and Production Inc.		Well API No. 30 025 06080
Address P. O. Box 730 Hobbs, New Mexico 88240-2528		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input checked="" type="checkbox"/>		<input checked="" type="checkbox"/> Other (Please explain) EFFECTIVE 6-1-91
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator Texaco Producing Inc. P. O. Box 730 Hobbs, New Mexico 88240-2528		

II. DESCRIPTION OF WELL AND LEASE		Kind of Lease State, Federal or Fee FFF	Lease No. 880620
Lease Name M B WEIR B	Well No. 7	Pool Name, including Formation MONUMENT TUBB	
Location Unk Letter M : 660 Feet From The SOUTH Line and 825 Feet From The WEST Line Section 12 Township 20S Range 37E , NMPM, LEA County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent) 1670 Broadway Denver, Colorado 80202	
Name of Authorized Transporter of Oil Texas New Mexico Pipeline C <input checked="" type="checkbox"/>	or Condensate <input type="checkbox"/>		
Name of Authorized Transporter of Casinghead Gas Texaco Exploration and Production Inc. <input checked="" type="checkbox"/>	or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1137 Eunice, New Mexico 88231	
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 12	Twp. 20S
		Rge. 37E	Is gas actually connected? YES
			When? 11/01/65

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

IV. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completion - (X)									
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
Perforations					Depth Casing Shoe				
TUBING, CASING AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE		Producing Method (Flow, pump, gas lift, etc.)	
Date First New Oil Run To Tank	Date of Test		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test - MCF/D	Length of Test		
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 K. M. Miller	Div. Ops. Engr.
Printed Name May 7, 1991	Title 915-688-4834
Date	Telephone No.

OIL CONSERVATION DIVISION	
Date Approved	JUN 05 1991
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.

RECEIVED

MAY 23 1991

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HOBBS CENTER