

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

COPIES OF FILE C.C.C.  
JAN 3 3 22 PM '66

OPERATOR
PRODUCTION OFFICE

TEXACO Inc.

P. O. Box 728 - Hobbs, New Mexico

Reasons for filing (check proper box)

New Well	<input type="checkbox"/>
Change in Transporter of:	
Oil	<input checked="" type="checkbox"/>
Casinghead Gas	<input type="checkbox"/>
Dry Gas	<input type="checkbox"/>
Condensate	<input type="checkbox"/>

Other (Please explain)

\*This form filed to show change in Transporter from Shell Pipe Line to The Permian Corporation, and show as oil well.

If change of ownership give name and address of previous owner

*W. J. Olson, Inc. 1414 S. 1st St. Amarillo, Texas*

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
M. B. Weir "B"	7	East, Weir Tubb (R-3051)	State, Federal or Fee
Location		East Weir-Tubb R-3051	
Section	660	Feet From The South	Line and 825 Feet From The West
Range	12	Township	20-S
Range	37-E	Range	37-E
County	Lea	County	Lea

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
The Permian Corporation	1509 West Wall Ave. - Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Phillips Petroleum Company	P. O. Box 6666 - Odessa, Texas					
If well produces oil or gas, give location of tubing	Unit	Sec.	Twp.	Range	Is gas actually connected?	When
	M	12	20-S	37-E	Yes	November 1, 1965

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
	Yes	No	NEW	NEW	NEW	NEW	NEW	NEW
Date Completed	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
August 3, 1962	November 1, 1965	6670'	6837'					
Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	Depth Casing Shoe					
East, Weir Tubb (GAS) Tubb	6426'	6868'	6868'					
Perforate 2-7/8" Casing with 2 Jet shots per ft. 6426' to 6432', and 6478' to 6484'.								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	9-5/8"	1387'	600 Sx.					
8-3/4"	2-7/8"	6868'	800 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 of Test	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
November 1, 1965	November 1, 1965	Flow	
Duration of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	600	-	16/64"
Actual Oil Produced	Oil-Bbls.	Water-Bbls.	Gas-MCF
16	16	None	850

GAS WELL

Actual Gas Produced (MMCF)	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Producing Method (flow, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

*San A. H. Hett*  
District Superintendent  
(Signature)  
(Title)

January 1, 1966

(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY *James S. Hines*  
TITLE *Superintendent*

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.