

0. OF COPIES RECEIVED	
DISTRIBUTION	
NTA FE	
LE	
S.G.S.	
AND OFFICE	
TRANSPORTER	OIL GAS
PERATOR	
ORATION OFFICE	
erator	

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

TEXACO, INC.  
DRAWER 728  
HOBBS, NEW MEXICO 88240

ason(s) for filing (Check proper box)		Other (Please explain)	
w Well <input type="checkbox"/>	Change in Transporter of:	Change in lease name.	
completion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>		
ange in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

Change of ownership give name  
Address of previous owner

DESCRIPTION OF WELL AND LEASE

ase Name	Well No.	Pool Name, Including Formation	Kind of Lease
New Mexico "H" State NCT-1	4	Eunice	State, Federal or Fee
Location			
Unit Letter J	3300	Feet From The South	Line and 1980 Feet From The East
Line of Section 31	Township 20-S	Range 37-E	NMPM, Lea County

SIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

ime of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Texas-New Mexico Pipe Line Company	P. O. Box 1510 - Midland, Texas					
ime of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input 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					
well produces oil or liquids, re location of tanks.	Unit P	Sec. 21	Twp. 20-S	Rge. 37-E	Is gas actually connected? Yes	When Not Available

his 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	Same Res'tv.	Diff. Res'tv.
te Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
ol	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
rfications						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE  
L WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow-  
able for this depth or be for full 24 hours)

ite First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
ength of Test	Tubing Pressure	Casing Pressure	Choke Size
ctual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

AS WELL

ctual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
esting Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

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.

H. SCOTT (Signature)  
ST. ACCOUNTANT (Title)  
P 1 1967 (Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY \_\_\_\_\_  
TITLE \_\_\_\_\_

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 allow-  
able 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.