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FROM OFFICE	
TRANSPORTER	OIL
	GAS
FOR	
LOCATION OFFICE	

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

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

1. **TEXACO Inc.**
P.O. Box 728, Hobbs, New Mexico 88240

Is for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> Change in ownership	
<input type="checkbox"/> Extension	<input checked="" type="checkbox"/> Effective 4-1-72
<input type="checkbox"/> Change in ownership	
<input type="checkbox"/> Change in ownership	

Age of ownership give name
Address of previous owner

1. **DESCRIPTION OF WELL AND LEASE**

Well No.	39	Well Name	Eunice Monument Grayburg	Kind of Lease	State, Federal or Fee	Fee	Lease No.
Section	29	Township	20-S	Range	37E	NMPM	Lea County

14. **LOCATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Authorized Transporter of Oil <input checked="" type="checkbox"/> or Casinghead Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Texas-New Mexico Pipe Line Co.	P.O. Box 1510, Midland, Texas 79701
Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Corp.	P.O. Box 6666, Odessa, Texas 79760

Produces oil or liquids, or both of tanks.	Unit	Sec.	Feet	Eye.	Is it directly connected?	When
	D	20	208	37E	Yes	Not available

17. **COMPLETION DATA**

Signature Type of Completion - (X)	Workover	Deepen	Plug Back	Same Res'ty.	Diff. Res'ty.
Added	Date Compl. Rec'd			P.B.T.D.	
Units (DF, RKB, RT, CR, etc.)	Name of Prod.	Gas Pay	Tubing Depth		
Conditions			Depth Casing Shoe		

TUBING, Casing, AND CEMENTING RECORD			
HOLE SIZE	CASING SIZE	DEPTH SET	SACKS CEMENT

2. **DATA AND REQUEST FOR ALLOWABLE WELL**

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

WELL

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

VI. **CERTIFICATE OF COMPLIANCE**

by certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given is true and complete to the best of my knowledge and belief.

(Signature)
Assistant District Superintendent
(Title)
March 24, 1972
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 27 1972, 19
Orig. Signed by
Joe D. Ramey
Dist. 1, Supv.

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

RECEIVED

MAR 2 1972

OIL CONSERVATION CO. INC.
HOUSTON, TEX.