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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

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

Form C-101
Supersedes Old C-101 and C-102
Effective 1-1-65

Operator
TEXACO Inc.

Address
P. O. Box 728 - Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

New Well ☐ Change in Transporter of:
Recompletion ☒ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Gashead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

1. DESIGNATION OF WELL AND LEASE

Lease Name C. H. Weir B	Well No. (Post Office, including Postation) 6	Owner Skaggs Drinkard	State, Federal or Free State
Location Unit Letter P ; 660 Feet From The East Line and 660 Feet From The South Line of Section 11 Township 20-S Range 37-E NM Lea County			

2. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Shell Pipe Line Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1910, Midland, Texas
Name of Authorized Transporter of Gashead Gas ☐ or Dry Gas ☐ Warren Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) Lovington, New Mexico
If well produce oil or liquids, give location of tanks. Unit K Sec. 12 Twp. 20-S Rge. 37-E	Is gas actually connected? Yes When 6-13-78

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

PC-70

3. COMPLETION DATA

Designate Type of Completion -- (X) ☒ Oil Well ☐ Gas Well	New Well ☐ Workover ☒ Deepen ☐ Plug Back ☐ Some Tests, Full Res. ☒		
Date Spudded 1-8-65	Date Comp. Ready to Prod. 6-13-78	Total Depth 6900'	P.B.T.D. 6865'
Elevations (DF, RFB, RT, CR, etc.) 3574' DF	Name of Producing Formation Drinkard	Top Oil/Gas Pay 6771'	Tubing Depth 6900'
Perforations 2-7/8" csg perforated w/1 JSPF @ 6771', 82', 6817', 27', 31', 35', 46', 57', 62' & 6871'		Depth Casing Shoe 6900'	

4. TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE 11"	CASING & TUBING SIZE 8-5/8"	DEPTH SET 1411	SACKS CEMENT 550
7-7/8"	2-7/8"	6896	900
7-7/8"	2-7/8"	6900	900

5. TEST DATA AND REQUEST FOR ALLOWABLE (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)

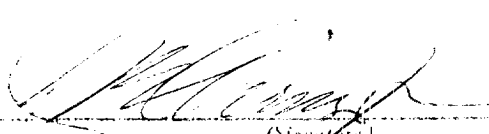
Date First New Oil Run To Tanks 6-13-78	Date of Test 6-13-78	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 Hours	Tubing Pressure 60#	Casing Pressure -	Choke Size 12/64"
Actual Prod. During Test	Oil - Bbls. 1	Water - Bbls. 0	Gas - MCF 41

6. GAS WELL

Actual Prod. Test - MCF/D 41	Length of Test	Lbs. Condensate/MMCF	Gravity of Condensate
Testing Method (spot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

7. 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.



Assistant District Superintendent

6-19-78

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE **SUPERVISOR DISTRICT 1**

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 available data taken on the well in accordance with RULE 1101.

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

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