Submit 5 Copies	E	iner V			ew Mexico ural Resources Departm			Form C-104 Revised 1-1-89
Appropriate District Office DISTRICT J P.O. Box 1980, Hobbe, NM 88240					•			See Instructions at Bottom of Page
DISTRICT II P.O. Drawer DD, Artesia, NM \$8210	(P.O. B	TION DIVISIO	1		
DISTRICT III		Sai	nta Fe,	New M	exico 87504-2088			
1000 Rio Brazos Rd., Aztec, NM 8741					BLE AND AUTHORIZ			
Operator						Well	API No.	
Texaco Exploration and P	roduction li	nc.				30	025 09207	<i>✓</i>
	lew Mexico	88240	-2528	1				
Reason(s) for Filing (Check proper box	•				X Other (Please expla			· ·
New Well U Recompletion	Oil	Change in	Transpor Dry Gas		EFFECTIVE 6-	-1-91		
Change in Operator	Casinghead	i Gas 🕅	Condens	ate			·	
If change of operator give name and address of previous operator <u>Te</u>	kaco Produ	cing Inc	<u>, P</u>	. О. Во	x 730 Hobbs, Nev	w Mexico	88240-25	28
II. DESCRIPTION OF WEL	L AND LEA	SE						
Lease Name				•	ng Formation	State	of Lease Federal or Fee	Lease No. 393690
E F KING		4	LANG	LIE MAT	TIX 7 RVRS Q GRAYBU	IRG FEE		
Unit LetterM	. 660		Feet Fro	m The SC	UTH Line and 660	F	eet From The W	EST Line
· · · · · · · · · · · · · · · · · · ·	23	IS IS					LEA	
Section Town	ship 23		Range		, NMPM,			County
III. DESIGNATION OF TRA Name of Authorized Transporter of Oil Texas New Mexico Pipeling		R OF OI or Conden		NATU	Address (Give address to wh		l copy of this form over, Colorad	
Name of Authorized Transporter of Ca Texaco Exploration			or Dry C nC.	ias 🛄	Address (Give address to wh P. O. Box 11			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp. 235	Rge. 36E	is gas actually connected? YES	When	?	IOWN
If this production is commingled with the	at from any othe	r lease or p	xool, give	comming	ing order zumber:	······		
IV. COMPLETION DATA								
Designate Type of Completion	n - (X)	Oil Well	0	as Well	New Well Workover	Deepen	Plug Back Sa	me Res'v Diff Res'v
Date Spudded	Date Comp	. Ready to	Prod.	- <u></u>	Total Depth		P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	oducing Fo	mation		Top Oil/Gas Pay		Tubing Depth	
Perforations							Depth Casing S	hoe
	T	UBING,	CASIN	G AND	CEMENTING RECOR	D		
HOLE SIZE	CAS	ING & TU	BING SI	ZE	DEPTH SET		SAC	
						<u></u>		
V. TEST DATA AND REQU	FST FOR AL	LLOWA	BLE		<u> </u>	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
				l and must	be equal to or exceed top allo			full 24 hours.)
Date First New Oil Run To Tank	Date of Test	1			Producing Method (Flow, pu	mp, gas lift, i	eic.)	
Length of Test	Tubing Pres	ant.			Casing Pressure	·····	Choke Size	
-							Gas- MCF	
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.		Um NICF	
GAS WELL					L		_ L	· · ·
Actual Prod. Test - MCF/D	Length of T	cal			Bbis. Condensate/MMCF		Gravity of Con	lensale
R. M. B. B. B. B. B. B. B. B. B.	Tubing Pres		in.)		Casing Pressure (Shut-in)		Choke Size	
Testing Method (pitot, back pr.)	i uotag rret		,					
VI. OPERATOR CERTIFI I hereby certify that the rules and reg Division have been complied with an	ulations of the C	Dil Conserv	ation	CE	OIL CON	SERV	ATION DI	VISION
is true and complete to the best of m					Date Approved	j		
Z.m. Mille	, ,				1			The Carlos
Signature					By	ынана 1 01 г сн о	ENAL STR	0N
K. M. Miller Printed Name		Div. Ope	ers. En Tide	igr.	Title	-		
May 7, 1991		915-6	88-48	<u> </u>	1109		ње на 	<u> </u>
Date		Telep	hone No.	•	1			

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.

Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.

						Form C-104	
						Format 06-01	
DISTRIBUTION	C	IL CONSERV	ATION DI	VISION	1	Page 1	
		P. O. B	OX 2088				•
V.8.0.4.		SANTA FE. NE	W MEXICO	87501			
LAND OFFICE							
	•	•					
TRANSPORTER CAL I		REQUEST F	OR ALLOWABLI	E			
OPERATOR I			AND	-	• .		
PROBATION OFFICE	ALITHOS	ZATION TO TRAN		NATUR.	24.3 14		
	AUTHOR		SPORT OIL AND				
Operator							
		· .		•			
TEXACO Producing Inc.	a						
		00040					
P. O. Box 728, Hobbs, Ne	ew Mexico	0 88240					
Resson(s) for filing (Check proper box)				e (Please e			
New Veil	Change is	n Transporter of:	Ch	ange of	Operator fro	m Getty to	0
			Dry Gas TE	XACO P	roducing Inc	· 12/31/84	4
			Condensate			· ·	
Y Change in Ownership		nghead Gas	Condensate				
f change of ownership give name		-	<u>.</u> .				
I. DESCRIPTION OF WELL AND	Well No.	Pool Name, Including			Ind of Lease	Fee	Locse No.
I. DESCRIPTION OF WELL AND	LEASE Well No.	Poor Name, Including			ind of Leane late, Federal or Fee	Fee	Locse No.
I. DESCRIPTION OF WELL AND	4	- ·	x 7-Rivers		late, Foderal or Foo	Fee	Loase No.
I. DESCRIPTION OF WELL AND Local Name E. F. King Localion Unit Letter <u>M</u> : <u>660</u>	Well No. 4 D Feat Fra	Langlie Matti	x 7-Rivers 660	Queen	late, Federal of Fee		Loaso No.
I. DESCRIPTION OF WELL AND Local Name E. F. King	0Feet Fra	Langlie Matti	x 7-Rivers		late, Federal or Fee Feet From The		
I. DESCRIPTION OF WELL AND Local Name E. F. King Localion Unit Letter <u>M</u> : <u>660</u> Line of Section <u>1</u> Town	Well No. 4 D Feat Fra ship 23	Langlie Matti me The South L Range	x 7-Rivers 660 36	Queen	late, Federal or Fee Feet From The		
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NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the tules and regulations of the Oil Conservation Division have been compiled with and that the information given is true and complete to the best of my knowledge and benef.

W. D. hh

(Signature) <u>Dirottion Coerations Manager</u> (Title) April 30, 1985

(Cale)

OIL CONSERVATION DIVISION	
APPROVED June 1,	85
y Jun Solon	
DISTRICT I SUFERVISOR	

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

If this is a request for allowable for a newly drilled or deepense 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. E. IE. and VI for changes of ownerwell name or number, or transporter, or other such change of condition.

Suparate Forma C-104 must be filed for each pool in multipl composited wells.

RECEIVED MAY 91 1985 HOBUS PRES

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+0, (r (0))(7, +r(1)/10	Form C-103 Supersedex ()Id
NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-101 Effective 1-1-65
H.C.	Su, Indicate Type of Leave State Fee [x]
AND OFFICE	S. State Off & Gon Levice No.
SUNDRY ROTICES AND DEPORTS ON WELLS too not use this form to contact to a new torget called a mathematical acception of the second state of the proposal sub-	7. Uaft Agreement Fame
O'L X CAS DTHIP.	6, Fam a Lease Jane
Getty Oil Company	E. F. King
P. O. Box 730; Hobbs, New Mexico 88240	4
Lecouton of Well	10. Field and Fool, or Wilded Langlie-Mattix
UNIT LETTER M . 660 FEET FROM THE South LINE AND 660 FEET FROM	
THE West LINE, SECTION 1 TOWNSHIP 23-S RANGE 36-E NMPRE	
3437' KB	12. County LEA
Check Appropriate Box To Indicate Nature of Notice, Report or Ot NOTICE OF INTENTION TO:	er Data FREPORT OF:
- LAF CRIA REMEDIAL WORK	ALTERING CASING
- IMPORATILY ADANDON	PLUG AND ABARDONMENT
OTHER Put well back	on production x
Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including work) SET RULE 1903.	
Pulled pump and tubing - Replaced bad joint of tubing - Ran new pump put well back on production.	and rods and
. Thereby certify that the information above is true and complete to the best of my knowledge and belief.	
Michael Gochest Area Superintendent	7-13-77
ΥΙΥLΣ	0ATC

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PROTIONS OF APPRICAL, IP	YHAI -

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OIST HIBUTION C. 102 and C.103 SAN.: A FE	N . OF COPIES RECEIVED	<u>٦</u>	1	Form C-103
SAN. A FE Image:		-		
FILE U.S.G.S. LAND OFFICE Sc. Indicate Type of Lesse OPERATOR S. State OII & Gas Lesse No. 1. Sc. Indicate Type of Lesse No. 1. State OII & Gas Lesse No. 1. State OII & Gas Lesse No. 1. State OII & Gas Lesse No. 2. Name of Operator 8. Farm or Lesse Name GETTY OIL COMPANY 8. Farm or Lesse Name 3. Address of Operator 9. Well No. 4. Location of Well 10. Field and Pool, or Wildedt UNIT LETTER M 660 FEET FROM THE Solution of Well 10. Field and Pool, or Wildedt Intermediation of Show whether DF, RT, GR, etc.) 12. County IFA Check Appropriate Box To Indicate Nature of Notice, Report of Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUG AND ABANDON PLUG AND ABANDON PLUG AND ABANDON Commence of Intention To: Subsequent report of Cherrist AND CEMENT JabandonMENT OTHER NIO WE			ERVATION COMMISSION	
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Image: Construct in the	U.S.G.S.	-		5a. Indicate Type of Lease
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FOR PEORANCE TO BRILL OF TO DEPERTA ON PLUG ANCA DEPERTA RESERVOIR. 7. Unit Agreement Name 1.	LAND OFFICE	-		State Fee
1. OTHER- 7. Unit Agreement Name 2. Mame of Operator 8. Farm or Lease Name GETTY OIL COMPANY 8. Farm or Lease Name 3. Address of Operator 9. Well No. 9. Well No. 9. Well No. 4. Location of Well 10. Field and Pool, or Wildcat UNIT LETTER M 660 FEET LINE, SECTION 1 15. Elevation (Show whether DF, RT, GR, etc.) 12. County 16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PENFORM REMEDIAL WORK PLUG AND ABANDON PULL OR ALTER CASING CHANGE PLANS	OPERATOR			5. State Oil & Gas Lease No.
GETTY OIL COMPANY 3. Address of Operator 3. Address of Operator 9. Well No. 9. 0. BOX 249, HOBBS, NEW MEXICO 88240 10. Field and Pool, or Wildcat 4. Location of Well 10. Field and Pool, or Wildcat UNIT LETTER M	1. OIL XX GAS		WELLS ack to a different reservoir. h proposals.)	7. Unit Agreement Name
P. O. BOX 249, HOBBS, NEW MEXICO 88240 4 4. Location of Well 10. Field and Pool, or Wildcat UNIT LETTER M 660 FREE FEET FROM THE SOIPTH LINE, SECTION 1 TOWNSHIP 23S RANGE 36E THE WEST LINE, SECTION 15. Elevation (Show whether DF, RT, GR, etc.) 12. County 16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON TEMPORARILY ABANDON CHANGE PLANS OTHER NIO WELL	-	[
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temporarily abandon commence drilling opns. plug and abandonment pull or alter casing change plans casing test and cement jqb other NIO WELL			• •	
OTHER NIO WELL	TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	
			OTHER	NIO WELL

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting a work) SEE RULE 1103.

The well is uneconomical to operate. Being held for unitization and waterflood.

The well was shut-in 4-1-74.

Expires 11/1/15

	Original Signed By		
SIGNED C. L. Wade:	C. L. WADE	TITLE AREA SUPERINTENDENT	DATE
APPROVED BY		TITLE	DATE
CONDITIONS OF APPROVA			