

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Texaco Producing Inc.	
Address P.O. Box 728, Hobbs, NM 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name J. M. Matkins	Well No. 2	Pool Name, including Formation Langlie Mattix 7-Rivers Queen	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <u>N</u> : <u>660</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>14</u> Township <u>23S</u> Range <u>36E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas N.M. Pipeline Co. (0055-1474)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Texaco Producing Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 3000, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks.	Unit : <u>M</u> : <u>14</u> : <u>23S</u> : <u>36E</u> : <u>Yes</u> : <u>5/18/60</u>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

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

[Signature]
(Signature)
District Administrative Supervisor
(Title)
December 30, 1986
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 8 1987, 19_____
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT I SUPERVISOR

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

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Formal 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator
Texaco Producing Inc.

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

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas	Other (Please explain) Gas Transporter Name Change
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership	<input checked="" type="checkbox"/> Casinghead Gas		

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name J. M. Matkins	Well No. 2	Pool Name, including Formation Langlie Mattix 7-Rivers	Kind of Lease State, Federal or Fee FEE	Lease No.
Location Queen				
Unit Letter N	: 660	Feet From The South	Line and 1980	Feet From The West
Line of Section 14	Township 23S	Range 36E	NMPM, Lea County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

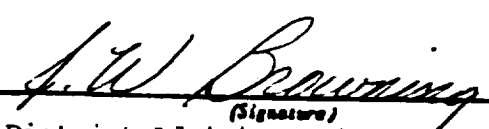
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas N.M. Pipeline Co. (0055-1474)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, NM, 88240
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX, 79762
If well produces oil or liquids, give location of tanks.	Unit : Sec. : Twp. : Rge. : Is gas actually connected? : When
M : 14 : 23S : 36E	Yes : 5/18/60

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

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


(Signature)
District Administrative Supervisor

(Title)
March 20, 1986
(Date)

OIL CONSERVATION DIVISION

APPROVED APR 22 1986, 19
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT I SUPERVISOR

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.

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

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
TEXACO Producing Inc.
Address
P. O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☒ Change in Ownership
 Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
 Other (Please explain)
 Change of Operator from Getty to TEXACO Producing Inc. 12/31/84

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name J.M. Matkins	Well No. 2	Pool Name, including Formation Langlie Mattix 7-Riv. Queen	Kind of Lease State, Federal or Fee FEE	Lease No.
Location Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West Line of Section 14 Township 23S Range 26E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Co. (0055-1474)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, N.M. 88240
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX 79762
If well produces oil or liquids, give location of tanks. Unit M Sec. 14 Twp. 23S Rge. 36E	Is gas actually connected? Yes When 5/18/60

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

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

W. B. Loh

(Signature)

District Operations Manager

April 3, 1985

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED 6/1, 19 85

BY *James L. Linton*
DISTRICT 1 SUPERVISOR

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.

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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name J. M. Matkins
9. Well No. 2
10. Field and Pool, or Wildcat Langlie-Mattix
12. County Lea

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator Skelly Oil Company
3. Address of Operator P. O. Box 1351, Midland, Texas 79701
4. Location of Well UNIT LETTER N , 660 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 14 TOWNSHIP 23S RANGE 36E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3774' DF

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Perforated and treated additional Queen and Penrose porosity intervals.
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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

- Moved in pulling unit 4-18-73. Pulled rods and tubing.
- Cleaned out 5-1/2" OD casing 3690-3698'.
- Spotted 250 gallons 15% acid 3438-3683'.
- Perforated 5-1/2" OD casing with one .50" shot per foot as follows: 3530-3533', 3534-3535', 3538-3540', 3546-3548', 3549-3551', 3552-3556', 3558-3560', 3568-3571', 3632-3634', 3641-3642', 3655-3659', 3664-3665', 3670-3672', 3674-3677', and 3680-3683'.
- Set packer at 3312'.
- Treated perforations 3530-3683' with 45,000 gallons 9# gel-brine water, 45,000# 20-40 sand, and 1250 gallons 15% non-emulsion acid, 10,000# rock salt, with 40 ball sealers, in four stages.
- Pulled tubing and packer.
- Perforated 5-1/2" OD casing with one .50" shot per foot as follows: 3510-3514', and 3515-3517'.
- Ran tubing open ended. Reversed out sand 3680-3700'.
- Ran 110 jts. (3384') of 2-3/8" OD tubing, set at 3393'.
- Ran rods and pump.
- Connected to wellhead and resumed production 4-21-73, producing 10 barrels of oil and 8 barrels of water per day, from Queen perforations 3510-3683'.

Continued on following page.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED (signed) D. R. Crow **D. R. Crow** TITLE **Lead Clerk** DATE **6-4-73**

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: