ibmit 5 Cories perceniate District Office Appropriate DISTRICT O. HOX 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

State of New Mexico Ene Minerals and Natural Resources Department

Revised 1-1-89 See Instruction

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. DK. Texaco Exploration and Production Inc. 30 025 10041 Address P. O. Box 730 Hobbs, New Mexico 88240-2528 Other (Please explain) Reason(s) for Filing (Check proper box) EFFECTIVE 6-1-91 Change in Transporter of: New Well Dry Gas Oil Recompletion X Casinghesd Gas X Condensate Change in Operator change of operator give name d address of previous operator

Texaco Producing Inc. P. 0. Box 730 Hobbs, New Mexico 88240-2528 II. DESCRIPTION OF WELL AND LEASE Kind of Lease State, Federal or Fee Lease No. Well No. Pool Name, Including Formation Lease Name 806510 E A STICHER **PADDOCK** Location Feet From The SOUTH Line and 810· 2310 _ Feet From The WEST Unit Letter _ 225 Township Range 37E , NMPM, County Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil or Condensate Texaco Trading & Transport 16825 Northchase Blvd., Ste. 600 Houston, Texas 770 Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas X or Dry Gas Texaco Exploration and Production Inc. P. O. Box 1137 Eunice, New Mexico 88231 If well produces oil or liquids, give location of tanks. is gas actually connected? When? Unit Twp Rge. Sec. _ 22S | **UNKNOWN** 37E YES If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well Deepen Plug Back Same Res'v Diff Res'v New Well Workover Designate Type of Completion - (X) Total Depth P.B.T.D. Date Compl. Ready to Prod. Date Spudded Top Oil/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING AND CEMENTING RECORD CASING & TUBING SIZE **DEPTH SET** SACKS CEMENT HOLE SIZE V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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.) Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tank Date of Test Choke Size Casing Pressure Tubing Pressure Length of Test Water - Bbls. Gas- MCF Actual Prod. During Test Oil - Bbls **GAS WELL** Gravity of Condensate Rble, Condensate/MMCF Actual Prod. Test - MCF/D Length of Test Choke Size Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) VL OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Date Approved ______ 3 1891 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. ig. Signed by Paul Kauta Signature Geologist Div. Opers. Engr. K. M. Miller

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Printed Nam

Date

May 7, 1991

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title_

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Title

915-688-4834

Telephone No.

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