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

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

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

I. Operator
TEXACO Inc.
Address
P.O. Box 728, Hobbs, New Mexico
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☒ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name C.H. Lockhart Fed. NCT-1	Well No. 3	Pool Name, including Formation Tubb	Kind of Lease State, Federal or Fee Federal	Lease No. LC-032100
Location Unit Letter 0 ; 659 Feet From The South Line and 1975 Feet From The East Line of Section 18 Township 22S Range 38E , 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 Pipe Line Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1510, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589, Tulsa, Oklahoma					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 18	Twp. 22S	Rge. 38E	Is gas actually connected? Yes	When 4-22-72

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

PC-4

IV. COMPLETION DATA

Designate Type of Completion - (X)	<input checked="" type="checkbox"/> Oil Well	<input type="checkbox"/> Gas Well	<input type="checkbox"/> New Well	<input type="checkbox"/> Workover	<input checked="" type="checkbox"/> Deepen	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Same Res'v.	<input checked="" type="checkbox"/> Diff. Res'v.
Date Spudded 5-2-53	Date Compl. Ready to Prod. 4-22-72		Total Depth 7,125		P.B.T.D. 6,370			
Elevations (DF, RKB, RT, GR, etc.) 3,359' GR	Name of Producing Formation Tubb		Top Oil/Gas Pay 6,098		Tubing Depth 6,000			
Perforations 2 JSPF @ 6,098, 6102, 10, 18, 24, 30, 35, 41, 44, 50, 55, 59, 65, 70, 72, 77, 80, 83, 89, 92, 94, 96, 6205, 08, 11, 16, 22, 28, 33, 39, 41, 53, 56 & 6261'.					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/4"	13-3/8"		391'		475 SX			
11"	8-5/8"		2,820'		2,200 SX			
7-7/8"	5-1/2"		7,125'		550 SX			

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)

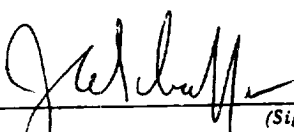
Date First New Oil Run To Tanks 4-21-72	Date of Test 4-22-72	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 Hr.	Tubing Pressure 300#	Casing Pressure	Choke Size 18/64"
Actual Prod. During Test	Oil-Bbls. 121	Water-Bbls. 2	Gas-MCF 359

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

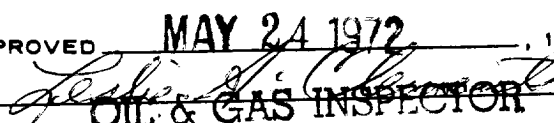
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)
Assistant District Superintendent
(Title)

April 24, 1972

(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAY 24 1972**, 19
BY 
OIL & GAS INSPECTOR
TITLE

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 multiply completed wells.

100-100-100-100
100-100-100-100

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APR 28 1972

OIL CONSERVATION COMM.
HOBBS, N. M.