

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

After WORKOVER produces from the Undesignated San Andres Pool.

NEW MEXICO OIL CONSERVATION COMMISSION

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

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

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	A. H. Blinebry NCT-1	Well No.	10	Pool Name, Including Formation	Undesignated San Andres	Kind of Lease	State, Federal or Fee
Location	Unit Letter D, 660 Feet From The North Line and 660 Feet From The West						
Line of Section	20	Township	22-S	Range	38-E	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"/>	Address (Give address to which approved copy of this form is to be sent)	P. O. Box 728 - Hobbs, New Mexico		
Name of Authorized Transporter of Casinghead Gas	<input checked="" type="checkbox"/>	or Dry Gas	<input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 20	Twp. 22-S	Range 38-E	Is gas actually connected? NO	When	

If this production is commingled with that from any other lease or pool, give commingling order number: NONE

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well YES	Gas Well NO	New Well YES	Workover YES	Deepen NO	Plug Back YES	Same Res'tv. NO	Diff. Res'tv. YES
Date Spudded	May 15, 1959	Date Compl. Ready to Prod.	September 27, 1966	Total Depth	7200'	P.B.T.D.	4640'	
Pool	Undesignated	Name of Producing Formation	San Andres	Top Oil/Gas Pay	4091'	Tubing Depth	4070'	
Perforations	Perforate 5 1/2" Casing with two jet shots at 4091', 4110', 4142', 4157', 4170', 4200', and 4260'.					Depth Casing Shoe	7200'	
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		400'		500 Sx.			
11"	8 5/8"		2881'		1210 Sx.			
7 3/4"	5 1/2"		7200'		650 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	September 25, 1966	Date of Test	September 27, 1966	Producing Method (Flow, pump, gas lift, etc.)	Pump
Length of Test	24 Hours	Tubing Pressure	Pump	Casing Pressure	Pump
Actual Prod. During Test	121	Oil-Bbls.	3	Water-Bbls.	118
				Gas-MCF	1

GAS WELL

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

Dan Gillett
Assistant District Superintendent
September 28, 1966

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY _____
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 Sections I, II, III, and VI only 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.