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

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

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

DESCRIPTION OF WELL AND LEASE				
Lease Name A. H. Blinebry NCT-1	Well No. 10	Pool Name, including Formation Blinebry	Kind of Lease Federal	
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	Lea County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> TEXACO Inc. (TRUCKS)	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 type="checkbox"/> or Dry Gas <input type="checkbox"/> NONE (To be connected later)	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	Rge. 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: NO

COMPLETION DATA								
Designate Type of Completion - (X)	Oil Well OIL	Gas Well NO	New Well NO	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. January 30, 1965	Total Depth 7200'		P.B.T.D. 6450'				
Pool Blinebry	Name of Producing Formation Blinebry	Top Oil/Gas Pay 5659'		Tubing Depth 5600'				
Perforations Perforate 5 1/2" Casing with one jet shot at 5659', 5667', 5672', 5684', 5698', 5744', 5755', and 5767'.		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"		


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 January 23, 1965	Date of Test January 30, 1965	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hours	Tubing Pressure Pump	Casing Pressure 50	Choke Size Pump
Actual Prod. During Test 6	Oil-Bbls. 6	Water-Bbls. NONE	Gas-MCF 4.8

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

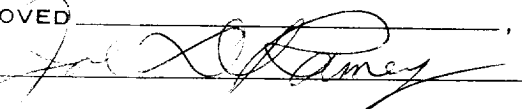
CERTIFICATE OF COMPLIANCE

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.


H. D. Raymond (Signature)
Assistant District Superintendent (Title)
February 2, 1965. (Date)

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