

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

API NO. (assigned by OCD on New Wells)

30-025-12143

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☐

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☒

b. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

SINGLE
ZONE ☒

MULTIPLE
ZONE ☐

2. Name of Operator

Pro-Gas Operating, Inc.

3. Address of Operator

P.O. Box 10888 - Midland, Texas 79702

7. Lease Name or Unit Agreement Name

W.L. Nix

8. Well No.

1

9. Pool name or Wildcat

Paddock

4. Well Location

Unit Letter C : 660 Feet From The North Line and 1650 Feet From The West Line

Section 20

Township 22 S

Range 38 E

NMPM Lea

County

10. Proposed Depth

11. Formation

Glorietta

12. Rotary or C.T.

13. Elevations (Show whether DF, RT, GR, etc.)

14. Kind & Status Plug. Bond

\$50,000 Bond

15. Drilling Contractor

NONE

16. Approx. Date Work will start

11/5/91

17. KB 3380

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
7 7/8	5 - 1/2	17 - 1/2	7250	600	2880

I propose to re-enter the #1 Nix well and set a C.I.B.P. at 5500' perforate the Glorietta formation from 5283' - 5289' and 5294' - 5302' with casing gun. Install blowout preventor and set in motion procedure required to complete as a commercial well.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE Hunter Midkiff TITLE Co-Owner DATE 10/30/91

TYPE OR PRINT NAME Hunter Midkiff TELEPHONE NO. 915 694-3495

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
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F.B.I.	
AND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-75
Format 05-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Requestor TEXACO Inc.	
Address P. O. Box 728, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well	Change of Transporter from Getty Oil Co. to TEXACO PRODUCING INC. effective 6/1/85.
<input type="checkbox"/> Recompletion	
<input checked="" type="checkbox"/> Change in Ownership	
Change in Transporter of:	
<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name W.L. Nix	Well No. 1	Pool Name, including Formation Drinkard & Brunson Drinkard Uls	Kind of Lease State, Federal or Fee	Lease No.
Location				
Unit Letter C	660	Feet From The North	Line and 1650	Feet From The West
Line of Section 20	Township 22S	Range 38E	NMPM,	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"/> Texas N.M. Pipeline Co. (0055-1466)	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"/> Texaco Producing Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 3000, Tulsa, OK 74102					
Well produces oil or liquids, or location of tanks.	Unit C	Sec. 20	Twp. 22S	Rge. 38E	Is gas actually connected? Yes	When 2/17/60

This production is commingled with that from any other lease or pool, give commingling order number: **CTB-143**

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

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. D. Loh
(Signature)
District Operations Manager

6/1/85

OIL CONSERVATION DIVISION

APPROVED **JUL 2 2 1985** 6/1, 1985
BY **JAMES L. Loh**
TITLE **DISTRICT 1 SUPERVISOR**

This form is to be filled 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 IV for changes of owner, well name or number, or transporter or other such change of condition.

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

RECEIVED

JUL 11 1985

OLD
H-2222 2222