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TRANSPORTER	OIL	
	GAS	
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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

I.

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"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead 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 W. L. Nix	Well No. 2	Pool Name, Including Formation Drinkard	Kind of Lease State, Federal or Fee	Fee
Location				
Unit Letter N	1650	Feet From The West	Line and 660	Feet From The South
Line of Section 17	Township 22-S	Range 38-E	County Lea	

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 Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510 - Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Skelly Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 38 - Hobbs, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 20	Twp. 22-S	Rge. 38-E	Is gas actually connected? YES	When January 17, 1965

If this production is commingled with that from any other lease or pool, give commingling order number: **NO**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well YES	Gas Well NO	New Well YES	Workover NO	Deepen NO	Plug Back NO	Same Res'v. - -	Diff. Res'v. - -
Date Spudded Dec. 16, 1964	Date Compl. Ready to Prod. January 17, 1965		Total Depth 7220'		P.B.T.D. 7198'			
Pool Drinkard	Name of Producing Formation Drinkard		Top Oil/Gas Pay 7000'		Tubing Depth 7215'			
Perforations 7000', 7003', 7005', 7021', 7026', 7035', 7049', 7057', 7067', 7088', 7103', 7111', 7117', 7128', 7136', 7150', 7172', 7178', 7181', and 7183'.					Depth Casing Shoe 7215'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	7 5/8"		1354'		650 Sx.			
6 3/4"	2 7/8"		7215'		800 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 January 10, 1965	Date of Test January 17, 1965	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 9	Tubing Pressure 100	Casing Pressure - - -	Choke Size 32/64"
Actual Prod. During Test 114	Oil - Bbls. 87	Water - Bbls. 27	Gas - MCF 1590

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.

H. D. Raymond
Assistant District Superintendent
January 18, 1965

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.