NO. COPIES RECEIVED	-	-	~				
DISTRIBUTION		L CONSERVATION COMMISSI					
SUNTA FE		ST FOR ALLOWABLE	URAL GAS ^{EC} 14 Supersedes Old C-104 and C- DEC 14 3 25 PH 55				
FILE		AND	D Effective 1/4-65				
U.S.G.S.	AUTHORIZATION TO T	RANSPORT OIL AND NAT	URAL GASE // O SE Q, C O				
LAND OFFICE							
TRANSPORTER			43 PH 100				
GAS							
OPERATOR							
I. PRORATION OFFICE							
Address	TEXACO Inc.						
	P 0 Box 728	Vielbe Mars Mars					
Reason(s) for filing (Check proper	1. 0. DOX (20	- Hobbs, New Mexico Other (Please expla					
New Well	Change in Transporter of:	Other (I tease expli	nn)				
Recompletion	Oil Dry	Gas					
Change in Ownership							
If change of ownership give nam							
and address of previous owner	e						
II. DESCRIPTION OF WELL AN							
Lease Name	Well No. Pool 1	Name, Including Formation	Kind of Lease				
A. H. Blinebry NCT-]	- 13 atterny 3 33	Drinkard	State, Federal or Fee				
n A	60 West	110					
Unit Letter;;	Feet From The West	_ine and Fee	et From The North				
Line of Section 28	Township 22-S Based	38-E					
Line of Section 20	Township 22-0 Range	, NMPM,	Lea County				
I. DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL G						
Name of Authorized Transporter of	Oil X or Condensate						
Texas-New Mexico Pip		D D D D T T D	h approved copy of this form is to be sent)				
Name of Authorized Transporter of	Casinghead Gas 🗙 or Dry Gas	Address (Give address to which	Midland, Texas h approved copy of this form is to be sent)				
Skelly Oil Company		P O Dem 770	n approved copy of this form is to be sent)				
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	Eunice, New Mexico				
give location of tanks.	E 33 22-S 38-E						
If this production is commingled			December 14, 1965				
· <u>COMPLETION DATA</u>	with that from any other lease or pool	l, give commingling order numb	er: PC-21				
	Oil Well Gas Well	New Well Workover Dee	pen Plug Back Same Res'v. Diff. Res'v.				
Designate Type of Comple	tion = (X) OIL NO						
Date Spudded	Date Compl. Ready to Prod.	Total Depth	EW NEW NEW NEW				
November 18, 1965	December 13, 1965	7350 *	7342 *				
Pool Drinkard	Name of Producing Formation	Top Oil/GXXPay	Tubing Depth				
	Drinkard	7044	73501				
Performing Perf. 2 7/8" (lasing one jet shot at 70	441, 70591, 70681, 70	0771 Depth Casing Shoe				
7098, 7143, 7178,	Casing one jet shot at 70. 71841, 71881, 71981, 720	81, 72151, 72421, 72	73501				
HOLE SIZE	TOBING, CASING, AN	ID CEMENTING RECORD 72	731 & 7311.				
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
7 7/8"	<u> </u>	1395	530 Sx.				
7 7/8"		73451	1000 Sx.				
/_//J	2 7/8" DRINKARD	73501	1000 Sx.				
TEST DATA AND REQUEST		_L					
TEST DATA AND REQUEST		after recovery of total volume of lo epth or be for full 24 hours)	ad oil and must be equal to or exceed top allow-				
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,	gas lift at a				
December 11, 1965	December 13, 1965	Flow	gus (1)(, etc.)				
Length of Test	Tubing Pressure	Casing Pressure	Choke Size				
10 Hours	250						
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	20/64# Gas-MCF				
82	77	5					
			30.0				
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 COMPLIAN	CE	OIL CONSE	RVATION COMMISSION				
-		CIL CONSE	COMMISSION				
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	. 19				
commission have been complied	with and that the information given e best of my knowledge and belief.	5.					
	my knowledge and bellef.	<bx< td=""><td></td></bx<>					
\frown	1	TITLE					
111 .1 ~ .							
(an fallet		This form is to be filed in compliance with RULE 1104.					
Dan Gillett (Signature)		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					
Assistant District Superintendent		tests taken on the well in accordance with RULE 111.					
(Title) December 14, 1965 (Date)		All sections of this form must be filled out completely for allow- able 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
					i	completed wells.	and to each pool in multiply

r;

HOUBS OFFICE O.C.C. DEC JU 3 25 PH 65 Dan Gillett , being of lawful age and being the I. Assistant District Superintendent for TEXACO Inc., do state that the deviation record which appears on this form is true and correct to the best of my knowledge.

Dan Gillett

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2 1/4

1 3/4 1 1/4

1 1/2 1 1/2 2 1/4

1 3/4

3 2 3/4

Subscribed and sworn to before me this the 14th day of December 19 65 • My commission expires October 20, 1966. R. E. Johnson Notary Public in and for Lea County, State of New Mexico. A. H. Blinebry NCT-1 33 Lease Well No. DEVIATION RECORD DEPTH DEGREES OFF 3951 1/4 7271 1/4 827 1 1140 3/4 13951 1 18021 1 23971 1/2 28251 3/4 32461 1 37661 2 2 1/2 1 1/2 1 1/2 41871

46561 48201 5124:

55581

57481

5980**'**

72501

73501