

DISTRIBUTION
ANTA FE
ILE
S.G.S.
AND OFFICE
TRANSPORTER
OPERATOR
PRORATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

FOR OIL AND NATURAL GAS

I.

Operator
TEXACO INC.
Address
P.O. Box 728, Hobbs, New Mexico 88240
Reason(s) for filing (Check proper box)
New Well ☒
Recompletion ☐
Change in Ownership ☐
Other (Please explain)

If change of ownership, give name and address of previous owner.

II. DESCRIPTION OF WELL AND LEASE

Lease Name
A.H. Blinebry (NCT-1) 40 Wantz Granite Wash
Kind of Lease
State, Federal or Fee
LC
Lease No.
032104
Location
Unit Letter **P** **660** **South** **660** Feet from The **East**
Line of Section **19** **22-S** **38-E** **Lea** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter (Check proper box)
Texas-New Mexico Pipe Line Co.
Name of Authorized Transporter (Check proper box)
Skelly Oil Co.
If well produces oil or liquids, give location of tanks.
B 19 22-S 38-E
Name of Authorized Transporter (Check proper box)
SKELLY OIL COMPANY MERGED INTO GETTY OIL COMPANY
Address (Give address to which approved copy of this form is to be sent)
P.O. Box 1510, Midland, Texas 79701
Address (Give address to which approved copy of this form is to be sent)
P.O. Box 1135, Eunice, New Mexico
If well produces oil or liquids, give location of tanks.
B 19 22-S 38-E
Name of Authorized Transporter (Check proper box)
Yes
When
3-1-76

If this production is commingled, give commingling order number: **PC-244**

IV. COMPLETION DATA

Designate Type of Completion
Date Spudded
12-26-75
3-1-76
Elevations (DF, RKB, RT, etc.)
3374' (GR)
Wantz Granite Wash
Perforations
7" OD csg liner perforated w/1 JSPF @ 7430-7483 & 7505' - 7585
HOLE SIZE
17 1/2"
12 1/4"
8 3/4"
Casing & Tubing Size
13 3/8"
9 5/8"
7"
DEPTH SET
400'
2900'
7597' (Top 2670')
SACKS CEMENT
650
1400
600

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

This test is for recovery of total volume of load oil and must be equal to or exceed top allowable production rate for full 24 hours

Date First New Oil Run To Tanks
2-29-76
3-1-76
Length of Test
24 hrs.
Actual Prod. During Test
35
Reducing Method (Flow, pump, gas lift, etc.)
Pumping
Choke Size

Gas-MCF
88

GAS WELL

Actual Prod. Test-MCF/D
Gravity of Condensate
Testing Method (pilot, back etc.)
Shut-in Pressure (Shut-in)
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.

Assistant District Superintendent

3-5-76

OIL CONSERVATION COMMISSION

APPROVED
19

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 only Sections I, II, III, and VI 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.

RECEIVED

NOV 19 1960
U. S. DEPARTMENT OF AGRICULTURE
WASHINGTON, D. C.