STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

| | | T - | _ |
|---------------------------------|-----|----------|---|
| ** . ** 10741 011 | | <u> </u> | |
| DISTRIBUTION | | | |
| | | | |
| PILE | | | |
| U.S.G.A. | | | |
| LAND OFFICE | | | |
| TRANSPORTER | פוג | | |
| THE SHIER | BAL | | |
| OPERATOR | | | |
| PRORATION OFFICE | | | |

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OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

Separate Forms C-104 must be filed for each pool in multi; completed wells.

REQUEST FOR ALLOWABLE

| | AND | |
|--|---|--|
| AUTHORIZATION TO TRANS | SPORT OIL AND NATURAL GAS | |
| I. Operator | | |
| | • | |
| TEXACO Producing Inc. | | |
| P. O. Box 728, Hobbs, New Mexico 88240 | | |
| Reason(s) for filing (Check proper box) | Other (Please explain) | |
| New Well Change in Transporter of: | Change of Operator from Getty to | |
| | TEXACO Producing Inc. 12/31/84 | |
| X Change in Ownership Castnghead Gas C | Condensate | |
| If change of ownership give name | | |
| and address of previous owner | | |
| H. DECCRIPATION OF MELL AND LEAST | | |
| II. DESCRIPTION OF WELL AND LEASE [Lease Name Well No. Pool Name, Including | Formation Kind of Lease Lease ha | |
| | x 7-River Queen State, Federal or Fee Fee | |
| Location | | |
| Unit Letter P 640 Feet From The South Li | ine and 330 Feet From The East | |
| | | |
| Line of Section 14 Township 24S Range | 36E , NMPM, Lea County | |
| The boundary of the same of th | 1 CAS | |
| Nume of Authorized Transporter of Oil & or Condensate | Agaress (Give address to which approved copy of this form is to be sent) | |
| Shell Pipeline Company | P.O. Box 1910, Midland, TX 79702 | |
| Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent) | | |
| El Paso Natural Gas Company | P.O. Box 1492, El Paso, TX 79978 | |
| Unit Sec. Twp. Rge. | Is gas actually connected? When Unknown | |
| If well produces cil er liquids, J 24 24S 36E | Yes | |
| If this production is commingled with that from any other lesse or pool | , give commingling order number: | |
| | | |
| NOTE: Complete Parts IV and V on reverse side if necessary. | II | |
| VI. CERTIFICATE OF COMPLIANCE | OIL CONSERVATION DIVISION | |
| I hereby certify that the rules and regulations of the Oil Conservation Division have | APPROVED June 1, / 19 85 | |
| been complied with and that the information given is true and complete to the best of | 11 11 11 17 17 | |
| my knowledge and belief. | BY | |
| | TITLE DISTRICT I SUFERVISOR | |
| w.B. hh | This form is to be filed in compliance with RULE 1104. | |
| W.D. hm | se this is a request for allowable for a newly drilled or deeper: | |
| (Signature) | well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. | |
| District Operations Manager | All sections of this form must be filled out completely for allow | |
| (Tuie) | able on new and recompleted wells. | |
| April 11, 1985 | 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 | |
| (Date) | ii well name or number, or transportation orner seen average or content | |

| Marine Committee to the second | | | |
|---|--|---|---|
| SANTA WE | • | CONSULTATION COMMESSION FOR ALLOWABLE | Point C-104 Supersedly Old C-104 and C-1 |
| U.S.G.S. | ATTHORIZATION TO TRA | AND MISPORT OIL AND NATURAL (| Elloctivo (-1-65 |
| LAND OFFICE | 5 - NMOCD - Hobbs | | 5/13 |
| TRANSPORTER GAS | l - File | , | |
| орепатон | l - Midland | | |
| PROBATION OFFICE | | | |
| Address | GETTY OIL COMPANY | Y | |
| • | P.O. Box 730, Hol | obs, NM 88240 | |
| Keason(s) for liling (Check proper box | Change in Transporter oil | Other (Please explain) | • |
| Recompletion | OII Dry Ga | 13 🔲 | |
| Change in Ownership X | Castrighead Gas Conder | nsate [] | |
| Il change of ownership give name and address of previous owner | Getty Reserve Oil Change effective | l, Inc., 312 HBF Bldg 8/1/80 | ., Midland, TX 79701 |
| DESCRIPTION OF WELL AND | LEASE. Well No.: Pool Name, Including F | ormation Kind of Lens | o Lerso No. |
| Cooper Jal Unit | lll Langlie Mat | ttix Slate, Fodera | |
| Location P 6 | 40 Feet From The South Lin | no and 330 Feet From | ThoEast |
| 1.4 | | 36-E , NMPM, | Lea county |
| Cine of Section 10 | wastap - Runge | , Norvey | |
| DESIGNATION OF TRANSPOR | TER OF OIL AND NATURAL GA | Address (Give address to which appro | ved copy of this form is to be sent) |
| Shell Pipe Line Cor | vnagn | Box 2648, Houston, | TX 77001 |
| Name of Authorized Transporter of Ca El Paso Natural Gas | 44 | Box 1492, El Paso, | |
| If well produces off or liquida, | Unit Soc. Twp. Pge. | Is gas actually connected? Wh | |
| give location of tanks. | J 24 24-S 36-E | Yes | Unknown |
| If this production is commingled wi COMPLETION DATA | th that from any other lease or pool, | | R-663 |
| Designate Type of Completi | on - (X) Oil Well Gas Well | New Well Workover Deepen | Plug Back Same Resty, Ulff, Nesty |
| Duta Spuddad | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Cas Pay | Tubing Depth |
| Electricas (DP, RAD, R1, GR, etc.) | items of producing a simulation | | |
| Perforations | | • | Depth Casing Shoe |
| | TUDING, CASING, AND | D CHMENTING RECORD | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| | | | |
| | | <u> </u> | |
| TEST DATA AND REQUEST F | OR ALLOWABLE (Test must be a | fier recovery of total valume of load oil | and must be equal to or exceed top allow |
| OH. WELL Data First New Oil Run To Tonks | | epih or be for full 24 hours) Producing Mothed (Flow, gamp, gas li | |
| Fig. 5 Hat Mea Off Hall to Louis | 2.10 | • | |
| Longth of Tost | Tubing Pressure | Casing Pressure | Choko Sizo |
| Actual Pred, During Tool | Oil-Bblo. | Water-Uble. | Gan-MCF |
| | | <u> </u> | |
| GAS WELL | | | |
| Actual Fred. Tost-MCFAD | Length of Tost | Bble. Condensate/MMCF | Gravity of Condensate |
| Teating hinthod (pitet, back pe.) | Tubing Proseure (Shut-in) | Cosing Pressure (Lhu2-1n) | Choke Size |
| CERTIFICATE OF COMPLIAN | CE | OIL CONSERVA | ATION COMMISSION |
| I hereby cartify that the rules and | regulations of the Oil Conservation | MYPROVED. | |
| Commission have been compiled: | with and that the information given a beat of my knowledge and belief. | Orig. Si | gued oy Runyan |
| <i>(</i> | , | TITLE Geol | |
| Less Con | / hotte | 15 | compliance with RULE 1104. |
| | MINO) | well, this form muct be accompa | walls for a newly diffied or deopens anted by a tabulation of the disviction |
| 1-1-1-1 | <u>.</u> | tonts taken on the well in acce | MUCHEO WHE HOLE III. |

All positions of this form must be filled out completely for allow able for new and to completed wells.

FIR out only bactions I, H, 1H, and M for changes of owner will name or number, or trousporter, or other such change of scandition

AREA SUPERINTENDENT

September 18, 1980

(l'itts)

(Date)

| | DISTRIBUTION SANTA FE FILE U.S.G.S. LAHD OFFICE IRANSPORTER GAS OPEF TOR PROFITION OFFICE | (| . CONSERVATION COM T FOR ALLOWABLE AND RANSPORT OIL AND | | Form C-104 Supersedes Old C-104 and C Effective 1-1-65 |
|-----|---|--|--|---------------------------------------|--|
| 1. | Getty Reserve | Oil. Inc. | | | |
| | Address | ing, Midland, Texas 79 | 701 | | |
| | Reason(s) for filing (Check proper banks) New We!1 Recompletion | | Other (Pleas | e explain) ge effective 1 | -23-80 |
| | Change in Ownership X | Casinghead Gas Cons | densate | | |
| | If change of ownership give name and address of previous owner | Reserve Oil, Inc., | 312 HBF Build | ing, Midland, | Texas 79701 |
| II. | DESCRIPTION OF WELL AND | Vell No. Pool Name, Including | Samula | 100-2-77 | |
| | Cooper Jal Unit | 111 Langlie Ma | | Kind of Lease State, Federal or Fe | Fee Lease No. |
| | Location P 6 | 40 Feet From The South | 330 | | East |
| | Unit Letter : 0 | Feet From The Bouting L | | Feet From The | |
| | Line of Section To | ownship 24-0 Range | 36-E , NMPN | <u>.</u> | Lea County |
| Ш. | | RTER OF OIL AND NATURAL G | GAS | | |
| | Name of Authorized Transporter of O Shell Pipe Line Con | | • | ouston, Texa: | y of this form is to be sent) |
| | Name of Authorized Transporter of C | | Address (Give address | to which approved cop | y of this form is to be sent) |
| | El Paso Natural Ga | Unit Sec. Twp. P.ge. | Box 1492, E | l Paso, Texas | s 79978 |
| | If well produces oil or liquids, give location of tanks. | J 24 24-S 36-1 | | ed? When | Unknown |
| | | ith that from any other lease or pool | , give commingling orde | r number: | R-663 |
| | COMPLETION DATA Designate Type of Completi | ion - (X) Oil Well Gas Well | New Well Workover | Deepen Plug | Back Same Resty. Diff. Rest |
| | Date Spudded | Date Compl. Ready to Prod. | Total Dorth | Р.В. | r.b. |
| | Elevations (DF, RAB, RT, GR, etc.) | Name of Producing Formation | Top Oll/Gas Pay | Tubir | ng Depth |
| | Perforations | | | Depth | a Casing Shoe |
| | | THE INC. CALLED A | ID CENTRAL DECOR | | |
| | HOLE SIZE | CASING & TUBING SIZE | O CEMENTING RECOR | | SACKS CEMENT |
| | | | | | |
| | | | | | |
| Į | | | | | |
| | TEST DATA AND REQUEST F OIL WELL | OR ALLOWABLE (Test must be able for this c | after recovery of total volu- lepth or be for full 24 hours | me of load oil and mus) | t be equal to or exceed top allow |
| İ | Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow | , pump, gas lift, etc.) | |
| | Length of Tast | Tubing Pressure | Casing Pressure | Chox | 2 Size |
| ŀ | Actual Fred. During Test | Oil-Bbis. | Water-Bbls. | Gas- | MOF |
| l. | | <u></u> | | | |
| | GAS WELL | | | | |
| ſ | Actual Prod. Test-MCF/D | Length of Test | Dale, Condensate/MMCI | Gravi | ty of Condensate |
| | Teating Method (pitot, back pr.) | Tubing Pressure (Shub-Aa) | Casing Fressure (phub- | -in) Choke | · Size |

VI. CERTIFICATE OF COMPLIANCE

January 31, 1980

Assistant District Manager

I hereby certify that the rules and regulations of the Oil Connervation Comminsion have been complied with and that the information given above is the and complete to the best of my knowledge and belief.

(Tule)

(1) der

OIL CONSERVATION COMMISSION

| APPROVED | FEB 1 5 198 0 | |
|----------|----------------------|--|
| юY | Orig. Signed by | |
| O | Jerry Sexton | |
| TITLE | Dist 1, Supv. | |

This form is to be filed in compliance with null 1104.

If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fitt out only Sections I. H. 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 multi-

| 1 | | 1 | | | |
|----------|---|---|--|-------------------|---|
| - | NO. OF COMIES MECEIVED | ^ | | | |
| - | DISTRIBUTION | EW MEXICO OIL | CONSERVATION COMMI | \$\$I | Form C-104 |
| | ANTA FE | REQUES' | T FOR ALLOWABLE | | Supersedes Old C-104 and C-110 |
| F | ILE | | # :D | | Effective 1-1-65 |
| · | J.S.G.S. | AUTHORIZATION TO TR | RAHSTURT OIL AND N | IATURAL GA | u S |
| L. | AND OFFICE | | i | | |
| ı | RANSPORTER GAS | | | | |
| C | PERATOR | | | | |
| 1. 5 | PRORATION OFFICE | | | | |
| 0 | perator | | | | |
| Ā | Reserve Oil, In | | | | |
| | 312 HBF Buildi | ng, Midland, Texas 79 | 701 | | |
| R | eason(s) for filing (Check proper box |) | Other (Please | explain) | |
| N | ew Weil | Change in Transporter of: | | | |
| R | ecompletion | OII Dry (| Sas | | |
| С | hange in Cwnership $old X$ | Casinghead Gas Cond | ensate | | |
| II. Di | ESCRIPTION OF WELL AND | Reserve Oil and Gas C This change to be effect LEASE Well No.: Pool Name, Including | tive JAN - 1 1977 | | |
| 1 | ease Name | 1 1 | | Kind of Lease | _ |
| <u> </u> | Cooper Jal Uni | t 111 Langlie Ma | ttix | State, Federal o | or Fee Fee |
| | ocation Unit Letter P , 64 | O Feet From The South | ine and 330 | _ Feet From Th | _e East |
| | | | | _ | |
| L | Line of Section 14 To | wnship 24-S Range | 36-E , NMPM. | | Lea County |
| | ESIGNATION OF TRANSPOR' | TER OF OIL AND NATURAL G | | o which approve | d copy of this form is to be sent; |
| | Shell Pipe Line | | Box 2648, Ho | | 1 |
| L | ame of Authorized Transporter of Car | | | | d copy of this form is to be sent; |
| , | | | | | |
| <u> </u> | El Paso Natura | I Gas Company | Box 1492, El | | |
| | well produces oil or liquids, ive location of tanks. | J 24 24-S 36- | | | Unknown |
| | this production is commingled wi | th that from any other lease or pool | , give commingling order | number: | R-663 |
| | Designate Type of Completic | on - (X) Oil Well Gas Well | New Well Workover | Deepen | Plug Back Same Restv. Diff. Restv. |
| D | ate Spudded | Date Compl. Ready to Prod. | Total Depth | | P.B.T.D. |
| E. | levations (DF, RKB, RT, GR, etc.; | Name of Producing Formation | Top Oil/Gas Pay | | Tubing Depth |
| <u> </u> | | | | | Depth Casing Shoe |
| ٦ | erforations | | | | Deptil Casting bilos |
| | | T | ND CEMENTING RECOR | | |
| <u> </u> | HOLE SIZE | CASING & TUBING SIZE | DEPTH SE | .T | SACKS CEMENT |
| - | | | | | |
| - | | | | | |
| | | | | | |
| , L | nom nama asin nnosinom m | OD ALLOWARIE CO. | after seen and a-set | ne of land all | d must be equal to or exceed top allow- |
| | EST DATA AND REQUEST F IL WELL | | after recovery of total volum depth or be for full 24 hours | | mass on equal to or exceed top dition. |
| | ate First New Oil Run To Tanks | Date of Test | Producing Method (Flow | , pump, gas lift, | etc.) |
| | | | | | |
| L | ength of Test | Tubing Pressure | Casing Pressure | T | Choke Size |
| - | - | · | | | |
| A | ctual Prod. During Test | Oil-Bhis. | Water - Bbis. | | Gas - MCF |
| _ | | | | | |
| G | AS WELL | | | _ | |
| A | ctual Prod. Test-MCF/D | Length of Test | Bbis. Condensate/MMCF | | Gravity of Condensate |
| 7 | esting Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Cosing Pressure (Shut- | ·in) | Choke Size |
| | | 1 | | | |

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given

| above is true and complete to the best of my knowledge and belief. |
|--|
| Elm Del |
| (Signature) |
| District Manager |
| JAN -6 1977 (Title) |
| (Date) |

OIL CONSERVATION, COMMISSION

19/1 __, 19 ___ APPROVED_ Orig. Signed by BY____ lero Savian 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 NULE 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.

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