

INCLINATION REPORT

OPERATOR:

Texas Pacific Oil Company, Inc.
P. O. Box 4067
Midland, Texas 79701

LOCATION:

S. R. Cooper "A" #2
330' FSL & 2310' FEL
Sec. 14, T-24-S, R-36-E
Lea County, New Mexico

DEPTH FEET

483
778
900
1230
1700
2163
2530
2995
3238

INCLINATION DEGREES

1/2
3/4
3/4
3/4
1
1 1/4
1 1/4
1 1/2
1 1/2


STATE OF TEXAS
COUNTY OF MIDLAND

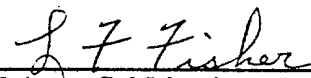
The undersigned states that he has knowledge of the facts and matter herein set forth and that the same are true and correct.



R. D. Hawkins

Subscribed and sworn to before me this the 29th day of April, 1977.

My Commission Expires June 1, 1977

 **L. F. FISHER**

Notary Public in and for Midland
County, Texas

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MAY 8 1977

OIL & GAS DIVISION, COMM.
HOUSTON, TEX.

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ILE		
U.S.G.S.		
AND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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-11
Effective 1-1-65

I.

Operator	Texas Pacific Oil Company, Inc.		
Address	P. O. Box 4067, Midland, Texas 79701		
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	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
S. R. Cooper "A"	2	Jalmat-Seven Rivers	State, Federal or Fee Fee	
Location				
Unit Letter	0	330	Feet From The south	Line and 2310
		Feet From The east		
Line of Section	14	Township	24-S	Range 36-E
		, NMPM,		Lea
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Western Oil Transportation Company, Inc.	P. O. Box 1183, Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	Jal, New Mexico 88252					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	23	24-S	36-E	Yes	4-28-77

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
2-22-77	4-26-77		3238'		3213'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3349' DF, 3340' GR	Jalmat-Seven Rivers		3113'		3068'			
Perforations					Depth Casing Shoe			
3113'-3166'					3238'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		37'		Redi-Mix			
12 1/4"	8 5/8"		1237'		650 sx.			
7 7/8"	5 1/2"		3238'		1250 sx.			
	2 3/8"		3068'					

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
4-26-77	4-26-77	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.			
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	90	120	75

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing 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.

W. J. McClintock
(Signature)
District Operations Superintendent
(Title)
4-28-77
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 4 1977, 19
BY [Signature]
TITLE SUPERVISOR DISTRICT

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.

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11/18/1977

OFFICE OF THE JUDGE COMM.
HON. J. H. HARRIS