

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.U.B.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

Operator TEXACO Inc.	
Address P. O. Box 728, Hobbs, New Mexico 88240	
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 _____

DESCRIPTION OF WELL AND LEASE

Lease Name Cotton Draw Unit	Well No. 74	Pool Name, Including Formation North Paduca Delaware	Kind of Lease State, Federal or Foreign Federal	Lease No. LC-061936
Location Unit Letter N : 660' Feet From The South Line and 1980' Feet From The West North				
Line of Section 34 Township 24-S Range 32-E , NMPM, Lea County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183 Houston, Texas 77001	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, Texas 79762	
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 34
	Twp. 24-S	Rge. 32-E
	Is gas actually connected? Yes	When 4-27-81

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded 3-13-81	Date Compl. Ready to Prod. 4-27-81	Total Depth 4967'	P.B.T.D. 4906'					
Elevations (DF, RKB, RT, GR, etc.) 3502' (GR)	Name of Producing Formation Paduca Delaware	Top Oil/Gas Pay 4783'	Tubing Depth 4767'					
Perforations Perfs 5 1/2" Csg w/2 JSPP @4783', 95', 4802', 08', 10', 13', 16', 21', 26', 44' & 4847'	Depth Casing Shoes 4967'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8" OD 24#		490'		550 Sx.			
7 7/8"	5 1/2" OD 15.5#		4967'		1506 Sx.			

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)

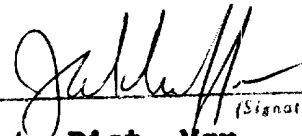
Date First New Oil Run To Tanks 4-17-81	Date of Test 4-27-81	Producing Method (Flow, pump, gas lift, etc.) Pumping (2" x 1 1/2")	
Length of Test 24 Hrs.	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test	Oil-Bbls. 42	Water-Bbls. 150	Gas-MCF 42

GAS WELL

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

CERTIFICATE OF COMPLIANCE

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


(Signature)
Asst. Dist. Mgr.
(Title)
4-28-81
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19____
BY **Leshie A. Clements**
OIL & GAS INSPECTOR
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 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 multiple-completed wells.


I, J. A. Schaffer, being of lawful age and being the Assistant District Manager for Texaco Inc., do state that the deviation record which appears on this form is true and correct to the best of my knowledge.


J. A. Schaffer, Asst. Dist. Mgr.

STATE OF NEW MEXICO)
COUNTY OF LEA) ss.

Subscribed and sworn to before me this the 29th day of April, 1981.

My commission expires October 13, 1983.


Patsy Roberts
Notary public in and for Lea County,
State of New Mexico

Lease - Cotton Draw Unit

Well Number 74

DEVIATION RECORD

<u>Depth</u>	<u>Degrees Off</u>
490'	1/2
933'	3/4
1496'	1
1925'	1
2206'	1
2486'	1
2795'	1
3105'	1
3447'	1
3849'	1
4154'	3
4185'	3 1/4
4248'	3
4309'	2 1/2
4370'	3
4430'	1 1/4
4495'	2
4556'	2
4617'	1
4967'	3