

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240
DISTRICT II
P.O. Box Drawer DD, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	TEXACO EXPLORATION & PRODUCTION INC	Well API No.	30 025 32094
Address P.O. BOX 730, HOBBS, NM 88240			
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	<input type="checkbox"/> Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/> Dry Gas
Change in Operator	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/> Condensate
Note: Original well name changed from Rhodes Yates Unit # 19			

If change of operator give name and address
of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Rhodes Yates Coop Fed Com-3	1	Rhodes Yates 7 Rivers	Federal	NM25741
Location				
Unit Letter L : 1360 Feet From The S Line and 50 Feet From The W Line				
Section 27 Township 26S Range 37E NMPM LEA COUNTY				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of	Oil	<input checked="" type="checkbox"/>	Condensate	<input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Tex NM Pipeline Co					PO Box 3000, Tulsa, OK 74102	
Name of Authorized Transporter of	Casinghead Gas	<input checked="" type="checkbox"/>	Dry Gas	<input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Sid Richardson C & G Co					PO Box 1226, Jal, NM 88252	
If Well Produces oil or liquids, give location of tanks	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
	E	27	26S	37E	Yes	1/25/94

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			
12/31/93	1/23/94		3500		3388			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
GR-2966'	Yates		3130		3026			
Perforations					Depth Casing Shoe			
3130-3324					3500			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING and TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 5/8		700		450, circ 89			
7 7/8	5 1/2		3500		1165, circ 350			

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 a full 24 hours.)

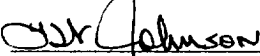
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
1/25/94	2/14/94	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hr			
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	51	16	59

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

VI. OPERATOR 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
Larry W. Johnson
Engr Asst
Printed Name
2/24/94
Title
397-0426
Date
Telephone No.

OIL CONSERVATION DIVISION

FEB 28 1994

Date Approved
By ORIGINAL SIGNED BY JERRY SEXTON
Title DISTRICT I SUPERVISOR

INSTRUCTIONS: This form is to be filed in compliance with rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only sections I, II, III, and VI for changes in operator, well name or number, transporter, or other such changes
- 4) Sepreate Form C-104 must be filed for each pool in multiply completed wells.