

I.

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator TEXACO EXPLORATION & PRODUCTION INC		Well API No. 30 025 32098	
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

If change of operator give name and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name W.H. Rhodes B Fed NCT-1	Well No. 24	Pool Name, Including Formation Rhodes Yates 7 Rivers	Kind of Lease State, Federal or Fee Fed	Lease No. LC-030174B
Location Unit Letter <u>H</u> : <u>1375</u> Feet From The <u>N</u> Line and <u>95</u> Feet From The <u>E</u> Line Section <u>27</u> Township <u>26S</u> Range <u>37E</u> NMPM <u>Lea</u> COUNTY				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Tex NM Pipeline Co		Oil <input checked="" type="checkbox"/> Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) PO Box 2528, Hobbs, NM 88240	
Name of Authorized Transporter of Sid Richardson C & G Co		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) PO Box 1226, Jal, NM 88252	
If Well Produces oil or liquids, give location of tanks	Unit G	Sec. 27	Twp. 26S	Rge. 37E
Is gas actually connected? Yes		When? 10/31/93		

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 9/25/93	Date Compl. Ready to Prod. 9/29/93		Total Depth 3196		P.B.T.D 3300			
Elevations (DF, RKB, RT, GR, etc.) GL-2987	Name of Producing Formation Yates		Top Oil/Gas Pay 3196		Tubing Depth 3189			
Perforations 3196-3212					Depth Casing Shoe 3325			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING and TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 5/8		1050		650, circ 87			
7 7/8	5 1/2		3325		900, circ 155			

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.)

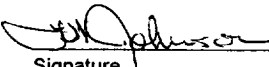
Date First New Oil Run To Tank 10/31/93	Date of Test 11/3/94	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hr	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 22	Water - Bbls. 443	Gas - MCF 6

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. 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 	Engr Asst
Printed Name Larry W. Johnson	Title 397-0426
Date 2/7/94	Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 01 1994
By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR
Title

OFFICE OF THE
ATTORNEY GENERAL
STATE OF NEW YORK
ALBANY