Submit 5 Copies Approprie's District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Rettom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Astesia, NM \$8210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM \$7410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.]	OTH	ANSI	OHI OII	- AND NA	TURAL GA					
Operator Texaco Exploration and Production Inc.								Well API No. 30 025 22032			
Address										 	
P. O. Box 730 Hobbs, New	w Mexico	8824	0-25	28	X Ou	et (Please expli	ain)				
Reason(s) for Filing (Check proper box)		~ ! <u>-</u>	. ~				-	1002			
New Well	Change in Transporter of: EFFECTIVE JANUARY, 1992 Oil Dry Gas										
Recompletion	Oil		. •	_							
Change is Operator	Casinghes	Gas X	Cond	ensate					··············		
If change of operator give name and address of previous operator							· · · · · · · · · · · · · · · · · · ·				
IL DESCRIPTION OF WELL	AND LEA	SE					T				
Lease Name Well No. Pool Name, Includ C C FRISTOE B FEDERAL NCT 2 12 JUSTIS BLINE					-		State,	Kind of Lease State, Federal or Fee FEDERAL		Lease No. NM-14218	
Location	0044										
Unit Letter	<u>: 2310</u>	: 2310 Feet From The SOUTH				TH Line and 2310 Feet From The EAST Line					
Section 26 Townshi	Section 26 Township 24S Range 37E					MPM,		LEA County			
III. DESIGNATION OF TRAN	SPORTE	R OF O	IL A	ND NATU	RAL GAS		.,			. <u></u>	
Name of Authorized Transporter of Oil Texas New Mexico Pipeline		or Conde	nsale		1	e <i>address to</i> wi 1670 Broad					
Nams of Authorized Transporter of Casinghead Gas X or Dry Gas Texaco Exploration & Production Inc						Address (Give address to which approved copy of this form is to be sent) P.O. Box 3000 Tulsa, OK 74102					
If well produces oil or liquids,	Unit Sec.		Twp. Rge.		is gas actuali	y connected?		When ?			
ive location of tanks.	<u>j</u> Pl	26	24		<u> </u>	YES		01	-17-92		
If this production is commingled with that: IV. COMPLETION DATA	from any othe	er lease or	pool, g	give comming	ling order mum	ber:	.,				
		Oil Well	1	Gas Well	New Well	Workover	Deepea	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		<u></u>			Total Depth	<u>l</u>	<u>l</u>	12222	<u> </u>	1	
Date Spudded	Date Compl. Ready to Prod.							P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perforations								Depth Casin	Depth Casing Shoe		
TUBING, CASING AND					CEMENTING RECORD						
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
	 							-			
	<u> </u>			:	 						
V. TEST DATA AND REQUES	T FOR A	LLOW	ABLI	E			abla fan th	is dandh an ha i	for full 24 hour	-e)	
OIL WELL (Test must be after r	Date of Tes		of load	d oil and musi	Producing M	exceed top and ethod (Flow, pu	emp, gas lift,	s aepin or be j sic.)	or just 24 note	(4.)	
Length of Test	Tubing Pres	Tubing Pressure			Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF			
GAS WELL	1										
Actual Prod. Test - MCF/D Length of Test					Bbls. Condensate/MMCF			Gravity of Condensate			
Testing Method (pilot, back pr.)	Tubing Pres	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
		9 0° -		\	┧┌───			1			
VL OPERATOR CERTIFIC					11 6	OIL CON	ISERV	ATION	DIVISIO	M	
I hereby certify that the rules and regulations of the Oil Conservation					1	71L 001	-ULI14			713	
Division have been complied with and that the information given above											
is true and complete to the best of my	knowledge an	d belief.			Date	Approve	d				
CUM off. 30					H	•••					
Signature Engr. Asst.					By B						
L.W. Johnson Printed Name			Title		Titla			e mae file			
02-14-92		(505)	393-							:	
Dela		الغاز	عونوسه	140.	11						

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 of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.