State of New Mexico

Submit 5 copies to Appropriate District Office

E. Jy, Minerals and Natural Resources Department

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

DISTRICT

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

Operator TEXACO EXPLORATION & PRODUCTION INC									Well API No. 30 025 32292				
Address		CTION						<u>ا</u>		020 02252			
P.O. BOX 730, HOB	BS, NM 88240												
New Well	w Well Change in Transporter of:						Other (Please explain)						
Recompletion	ecompletion Oil Dry Gas				Note: Langlie commingled				Mattix & Jalmat to be downhole				
Change in Operator	Casinghead Ga	Casinghead Gas Condensate				RE: NMOCD Order # R-10033 (12-10-93)							
change of operator give name and address f previous operator	•												
I. DESCRIPTION OF WELL AND	LEASE												
ease Name Well No. Pool Name, in			l Name, includ	uding Formation Kir				of Lease State, Federal or Fee Lease No.					
Cooper Jal Unit	1 1		almat Tansill Yates 7 Rivers				Federal LC			LC-032715			
Location Unit Letter	L : 21	50 F	Feet Fr	om The	S_Line	and <u>50</u>	F	eet F	rom The <u>V</u>	<i>1</i>	_Line		
Section 19					Range						COUNTY		
Georgia 13													
II. DESIGNATION OF TRANSPO	RTER OF OIL	AND NAT	URAL	GAS									
Name of Authorized Transporter of Shell Pipeline Co	Address (Give address to which approved copy of this form is to be sent) PO Box 2648, Houston, TX 77252												
Name of Authorized Transporter of	Casinghe	ad Gas 🔯] [Dry Gas 🔲	+				opy of this for	n is to be sen	1)		
Texaco E & P Inc / Sid Richardson	า				1		• •		ox 1226, Jal				
If Well Produces oil or liquids,	- IT D				Is gas actually connected? When?								
give location of tanks	J	24	245	36E	Yes				11/29/	93			
If this production is commingled with	that from any othe	r lease or p	ool, giv	e comminglin	g order numbe	r:							
IV. COMPLETION DATA													
Designate Type of Completic	on - (X)	Oil We	ell	Gas Well	New Well X	Workove	er Deepe	n	Plug Back	Same Res'	Diff Res		
Date Spudded	Date Comp	Date Compl. Ready to Prod.			Total Depth				P.B.T.D				
11/6/93	1/22/94				Top Oil/Con	3750 Top Oil/Gas Pay				3693			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					3006				Tubing Depth 3597				
GR-3294, KB-3304 Jalmat Perforations					3000				Depth Casing Shoe				
3006-3295									,	3750			
	TUBING, CASING AND				CEMENTING RECORD								
HOLE SIZE	ÇA	CASING and TUBING SIZE			DEPTH SET				SACKS CEMENT				
12 1/4	8 5/8	8 5/8			400				250, circ 64				
7/8 5 1/2		2			3750				1050, circ 130				
- Lugar													
V. TEST DATA AND REQUEST	EOR ALLOWA	RI F						-	<u> </u>				
	after recovery of		ne of lo	ad oil and m	ust be equal t	o or excee	d top allowal	ble fo	r this depth o	or be a full 2	4 hours.)		
Date First New Oil Run To Tank	Date of Tes			-			, pump, gas li						
11/29/93		12/31/93				F				ump			
Length of Test	Tubing Pres	Tubing Pressure				Casing Pressure				Choke Size			
24 Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.			Water - Bbis.				Gas - MCF				
		47			l	316 BLV	V		<u> </u>	13	·		
GAS WELL Actual Prod. Test - MCF/D	l anoth of T				Phis Condo				Gravity of Co	ndensate			
Actual Prod. Test - MCF/D	Length of 1	Length of Test				Bbls. Condensate/MMCF				Gravity of Goridonisato			
Testing Method (pitot, back pr.)	back pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)				Choke Size				
VI. OPERATOR CERTIFICATE	OF COMPLIAN	CE								,			
I hereby certify that the rules and regulation Division have been complied with and that	ons of the Oil Conse	rvation				OIL	CONSE	:R۱	ATION	DIVISIO	N		
is true and complete to the best of my kn	owledge and belief.							F	B : 3	194			
Jul Johnson					╣ ᢏ.	A			•				
Signature Larry W. Johnson	Engr Asst				Date	Date Approved							
	Title				By On the State of THREE SEXTON								
Printed Name 2/9/94							(H T RM)	77.1	SUPERVIS	OR			
		7-0426			Title								
Date	Те	lephone N	0.		II .								

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.

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