Submit 5 Copies
Appropriate District Coffice
DISTRICT !
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico E __y, Minerals and Natural Resources Departmen.

Form C-104
Revised 1-1-29
See Instructions
at Rottom of Page

OIL CONSERVATION DIVISION P.O. Box 2088

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

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

DISTRICT II P.O. Drawer DD, Astesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

			*****	<u> </u>							
Operator Texaco Exploration and Production Inc.							Well API No.				
rexaco exploration and Production Inc.						30 025 09662					
P. O. Box 730 Hobbs, Ne	w Mexic	o 8824	0-252	28							
Reason(s) for Filing (Check proper box)					_	et (Please expi	•		······································		
New Well	EFFECTIVE 10-01-91										
Recompletion	Oil Codoobo	L ad Gas 区	Dry G								
Change in Operator If change of operator give name											
and address of previous operator 18X8	co Prod	nciud lu	10× (P-0. B	9X-730	Hotobe, Ne	w Mexico	88240_	25 28_/		
II. DESCRIPTION OF WELL	AND LE		T=				1 25:- 4	-67			
Lesse Name Well No. Pool Name, Incl. COOPER JAL UNIT 140 JALMAT TA					ling Formation Kind of Lease State, Federal or Fee State, Federal or Fee State, Federal or Fee						
Location		1-10	1014	MAI 1/4	OLL INIE	O OLVEIN IN	ACV I FFF				
Unit LetterA	. 990)	_ Foot F	rom The N	ORTH Lie	e and990). F	eet From The	EAST	Line	
Section 25 Townshi	_ 2	48		36E		мрм,		LEA		6.	
Section - Township	P		Kange		, N	MILM"	***			County	
III. DESIGNATION OF TRAN	SPORTE	OF OF O		ID NATU						····	
Name of Authorized Transporter of Oil Shell Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2648 Houston, Texas 77252										
Name of Authorized Transporter of Casing	Address (Give address to which approved copy of this form is to be sent)										
Texaco Exploration	Sid Richardson Carbon & Gasoline Co.										
If well produces oil or liquids, Unit jve location of tanks.		Sec. Tw		Rge.	is gas actually connected? YES		When	When ? UNKNOWN			
If this production is commingled with that	from any of				<u> </u>		HC #	R- 559			
IV. COMPLETION DATA										•	
Designate Type of Completion - (X)		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded		Date Compi. Ready to I			Total Depth	<u> </u>	l	P.B.T.D.	L		
<u> </u>											
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
Perforations					<u> </u>				Depth Casing Shoe		
									•		
TUBING, CASING AN					CEMENTI		D				
HOLE SIZE	CASING & TUBING SI			SIZE	DEPTH SET			SACKS CEMENT			
	 						· · · · · · · · · · · · · · · · · · ·	<u> </u>			
W MOON DAMA AND DECLINO	20 000 4	T T CANT	ANER								
V. TEST DATA AND REQUES OIL WELL (Test must be after re					he equal to or	exceed ton alla	wahle for thi	e dansk ar ha f	or full 24 hours	-a 1	
Date First New Oil Run To Tank	be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)										
Length of Test	Tubing Pressure			Casing Pressu	re		Choke Size	Choke Size			
Actual Prod. During Test	Oil - Bbls.	vil - Bols.				Water - Bbis.			Gas- MCF		
GAS WELL											
Actual Prod. Test - MCF/D Length of Test						iate/MMCF		Gravity of Condensate			
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Choke Size	Choke Size		
VI. OPERATOR CERTIFICA	ATE OF	COMP	LIAN	ICE		W 00M	OFDI	TION		•	
I hereby certify that the rules and regular	tions of the	Oil Conserv	vation			OIL CON	SERVA	AHONL	טוצועונ	N	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Data	Approved		prav ()	A Man		
	~				ll Date	Approved	·	V	<u> </u>		
College Alexander					ByXISINAL SIGNED BY JEER						
Signature L.W. JOHNSON		Engr	. Assi	t			rgned by Rict i sijo				
Printed Name 04-14-92		(505) 3	Title 393_7	191	Title_			Sant Sant English St			
Date			obone N		i						

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.