Submit 5 copies to Ampropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

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

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

Sante Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator						Well API No.					
OXY USA INC.					 			3	0 025 25989		
Address P.O. BOX 50250,	MIDLAND, TX 79710)									
New Well	Change in Transp	Change in Transporter of:				Other (Please explain)					
Recompletion] Oil	Oil Dry Gas									
Change in Operator											
If change of operator give name and add of previous operator	ress TEXACO EXPL	ORATION	& PRODU	СТІС	N INC. P.O.	BOX 730. H	OBBS. NM 88	3240			
•	- IEAAOO EA I		u i i i i		711 1110, 1 .0.				<u>. </u>		
II. DESCRIPTION OF WELL A					. =		Kind of	Lease State, Fede	rator Fee Lagse	Na	
Lease Name MYERS LANGLIE MATTIX UN	MATTIX UNIT 135 LANGLIE MATTI				ing Formation			DERAL NM7488			
Location Unit Letter	B : 760	Feet	t From The	_N	ORTH Line	and 2080	Feet F	rom The <u>E</u>	ASTI	ine	
Section 6	Town	nship 249	S		Range	37E	NMPM		LEA CO	DUNTY	
III. DESIGNATION OF TRANS	PORTER OF OIL AN	ID NATUR	AL GAS								
Name of Authorized Transporter of	Oil		Condensate		Address (Give	address to wh	ich approved c	opy of this for	n is to be sent)		
Texas New Mexico Pipeline Co	<u> </u>						Colorado 8020	_			
· —					Address (Give address to which approved copy of this form is to be sent)						
Texaco Exploration & Production Inc If Well Produces oil or liquids, Unit Sec. Twp. Rge.					P. O. Box 1137 Eunice, New Mexico 88231 Is gas actually connected? When?						
give locaton of tanks	G	5 24	S 37E		YES				8/21/78		
If this production is commingled w	ith that from any other k	ease or pool,	give commi	ngling	order number	·					
IV. COMPLETION DATA	-		Can Mi	-11	New Well	Workover	Danner .	Diug Book	Some Beely	D'7 D - L	
Designate Type of Comple		Oil Weil	Gas W			VVOI KOYOI	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. R	Ready to Proc	i .		Total Depth			P.B.T.D			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay Tubing Depth						
Perforations						Depth Casing Sh					
TUBING, CASING AN				ND (CEMENTIN		D				
HOLE SIZE	CASIN	CASING and TUBING SIZE				DEPTH SET			SACKS CEMENT		
V. TEST DATA AND REQUE	ST FOR ALLOWARI	E						<u> </u>			
	e after recovery of tot		f load oil an	d mu	st be equal to	or exceed to	p allowable fo	or this depth o	or be a full 24	hours.)	
Date First New Oil Run To Tank	Date of Test						mp, gas lift, etc		•		
Length of Test	Tubing Pressu	Tubing Pressure			Casing Press	ure		Choke Size			
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.			Water - Bbis.			Gas - MCF			
GAS WELL					<u> </u>			L			
Actual Prod. Test - MCF/D	Length of Test				Bbls. Conder	sate/MMCF		Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressu	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIFICAT	E OF COMPLIANCE										
I hereby certify that the rules and regu Division have been complied with and is true and complete to the best of my	that the information given s					OIL C	ONSERV	ATION	DIVISION	l	
Signature	11 Bee				Dete	Approved_	ti		1994		
P. N. McGee	Land	Manager				'hbioaed'			·		
Printed Name	Title	· · · · · · · · · · · · · · · · · · ·			By		ORI		NED BY JE		
1/6/94 685-5600					Title_			DISTRIC	CT I SUPER	/ISOR	
Date	Telep	phone No.									

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 IV 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.