

1	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1
	GAS
OPERATOR	2
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Bl.

Operator Tesoro Petroleum Corporation	
Address 8520 Crownhill Boulevard, San Antonio, Texas 78209	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input checked="" type="checkbox"/> (PB)	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Santa Fe R.R.	Well No. 9	Pool Name, including Formation South Hospah-Upper Sand	Kind of Lease State, Federal or Fee	Lease No. Fee
Location				
Unit Letter F ; 1650 Feet From The North Line and 1650 Feet From The West				
Line of Section 7 Township 17N Range 8W, NMFM, McKinley County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1588, Farmington, New Mexico					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> ---	Address (Give address to which approved copy of this form is to be sent) ---					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 7	Twp. 17N	Rge. 8W	Is gas actually connected? No	When ---

If this production is commingled with that from any other lease or pool, give commingling order number: PC-365

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
	X					X		X
Date Spudded 9-30-66 (Orig.)	Date Compl. Ready to Prod. 7-7-70 (Recomplan)		Total Depth 1670' RKB		P.B.T.D. 1609' RKB			
Elevations (DF, RKB, RT, GR, etc.) 6972' KB; 6968' GL	Name of Producing Formation Upper Hospah Sand		Top Oil/Gas Pay 1570' RKB		Tubing Depth 1603' RKB			
Perforations 1571' - 1579' RKB					Depth Casing Shoes 1670' RKB			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12"	8-5/8"		24'		15 SX			
7-7/8"	5-1/2"		1670'		100 SX			
	2-3/8"		1603'					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equivalent to allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 7-7-70	Date of Test 7-10-70	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure	Casing Pressure 20 psi	Choke Size ---
Actual Prod. During Test 2.32	Oil - Bbls. 2.13	Water - Bbls. 0.19	Gas - MCF Tstm

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OIL CON. COM.
DIST. 3

GAS WELL N/A

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. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

[Signature]
(Signature)
Petroleum Engineer
(Title)
July 28, 1970
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 3 1970

BY Original Signed by Emery C. Arnold

TITLE SUPERVISOR DIST 73

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of ownership.

Separate Forms C-104 must be filed for each pool in multiply completed wells.