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| OPERATOR | | |
| PRORATION 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

I. Operator
Tesoro Petroleum Corporation
Address
8520 Crownhill Blvd., San Antonio, Texas 78209
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|-----------------------|---|---|-----------|
| Lease Name Santa Fe Railroad | Well No. 33 | Pool Name, Including Formation Upper Hospah | Kind of Lease State, Federal or Fee Fee | Lease No. |
| Location Unit Letter L ; 2310 Feet From The South Line and 330 Feet From The West Line of Section 5 Township 17N Range 8W , NMPM, 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 Pipeline Co. | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| 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 L | Sec. 5 | Twp. 17N | Rge. 8W | Is gas actually connected? Gas TSTM | When |

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

V. COMPLETION DATA

| | | | | | | | | |
|---|--|----------|--|----------|-----------------------------------|---|--------------|---|
| Designate Type of Completion - (X) | Oil Well <input checked="" type="checkbox"/> | Gas Well | New Well <input checked="" type="checkbox"/> | Workover | Deepen | Plug Back <input checked="" type="checkbox"/> | Same Rest'v. | Diff. Rest'v. <input checked="" type="checkbox"/> |
| Date Spudded 8-7-73 | Date Compl. Ready to Prod. 12/20/73 | | Total Depth 2652' | | P.B.T.D. 1600' | | | |
| Elevations (DF, RKB, RT, GR, etc.) 6870 GR; 6882 KB | Name of Producing Formation Upper Hospah | | Top Oil/Gas Pay 1578' | | Tubing Depth 1576' | | | |
| Perforations 1578 to 1582 w/4 JSPF (16 holes) | | | | | Depth Casing Shoe 2636' | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 12-1/4 | 8-5/8" OD | | 102' | | 100 sx Class 'C' | | | |
| 7-7/8" | 5-1/2" OD | | 2636' | | 385 sx 50-50 pozmix | | | |
| | 2-3/8" OD | | 1576' | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

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

| | | | |
|--|---------------------------------|--|-----------------------|
| Date First New Oil Run To Tanks 12/24/73 | Date of Test 12/24/72 | Producing Method (Flow, pump, gas lift, etc.) Pump | |
| Length of Test 8 hrs. | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test 68 BTF | Oil-Bbls. 67 | Water-Bbls. 1 | Gravity of Condensate |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| 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.

L. Charles Marquart
(Signature)

District Engineer

(Title)

12/26/73
(Date)

OIL CONSERVATION COMMISSION

APPROVED **JAN 8 1974**
BY **Original Signed by Emery C. Arnold**

TITLE **SUPERVISOR DIST. #3**

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 condition.

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