Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

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

## State of New Mexico Energy, Minerals and Natural Resources Department

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

7.1

DISTRICT III 1000 Rio Brezos Rd., Azzec, NM \$7410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS															
I. TO TRANSPORT OIL AND NATURAL GAS  [Operator] We										Vell .	I API No.				
Texaco Exploration and Production Inc.											0 039 05244				
Address 3300 North Butler Farmin	gton, Ne	w Mayir	-0 8·	7401											
Reason(s) for Filing (Check proper box)	gton, ite	W MEXIC	JU 8	7401		X C	ther (	Please expl	lain)					····	
New Well		Change is	•		of:		EFFE	CTIVE 6	-1-91						
Recompletion Change in Operator	Oil Casinghe	ad Gas 🔲	Dry G Conda												
If change of operator give name and address of previous operator Texe	ico Inc.	3300	Nort	h Bu	tler	Farmi	ngto	n, New	Mexico	0 1	87401				
II. DESCRIPTION OF WELL	AND LE		<b>.</b>												
Lease Name									Lease No. Federal or Fee 6 12050						
REGINA Location	<del> </del>	X 6 1)	BLA	NCO	P.C.	SOUTH (	GAS)	<del></del>	IF	EE_					
Unit Letter G	:165	0	_ Feet F	rom T	be NO	ORTH 1	ine an	165	0	_ Fe	et From The	EAST		Line	
Section 34 Townshi	p 24N Range 1W					, NMPM,					O ARRIBA County				
III. DESIGNATION OF TRAN	SPORTE			ND N	ATU			dana da							
Name of Authorized Transporter of Oil  Or Condensate  TEMPORARILY ABANDONED  Or Condensate  Or C											x seu	<b>'</b>			
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) TEMPORARILY ABANDONED													)		
If well produces oil or liquids, give location of tanks.	<del></del>				Rge.	. Is gas actually connected?				When ?					
If this production is commingled with that  IV. COMPLETION DATA	from any oth	ner lease or	pool, gi	ve con	nmingi	ling order nu	mber:		1						
Designate Type of Completion	- (X)	Oil Well	7	Gas W	/ell	New We	ı [ w	orkover	Deepe	2	Plug Back	Same Re	6'V	Diff Res'v	
Date Spudded		pl. Ready to	Prod.			Total Dept	<u> </u>	<del></del>	J		P.B.T.D.	L	1		
Elevations (DF, RKB, RT, GR, etc.)	rations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oil/Gas Pay					Tubing Depth			
Perforations						<u> </u>					Depth Casing Shoe				
		TIPNIC	CASI	NIC A	ANTO	CEMENT	TNIC	PEMP	<u> </u>		<u> </u>			· · · · · · · · · · · · · · · · · · ·	
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE					DEPTH SET					SACKS CEMENT				
Troce offe	CASING & TODING SIZE					027 111 021					Oriono dement				
	ļ														
V. TEST DATA AND REQUES					. :										
			of load	oil and	must	t be equal to or exceed top allowable for this depth or be for full 24 hours.)  Producing Method (Flow, pump, gas lift, etc.)									
Date First New Oil Run To Tank	Date of Tea		Producing h	neunoa	(riow, pu	mp, gas iy	c.)	<b></b>	<b>.</b>	<b></b>					
Length of Test	Tubing Pressure					Casing Pressure					ALREIAE !!				
Actual Prod. During Test	Oil - Bbls.					Water - Bbla.					JUN2 4 1991				
GAS WELL										-		ואר	01/	,	
Actual Prod. Test - MCF/D	Length of Test					Bbis. Condensate/MMCF					Grivity of Constitute DIST. 3				
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)					Casing Pressure (Shut-in).					Colonia de la co				
VI. OPERATOR CERTIFICATE OF COMPLIANCE						<del>-</del>									
I hereby certify that the rules and regulations of the Oil Conservation							OIL	CON	SER	VA	TION [	DIVIS	ION	1	
Division have been complied with and the is true and complete to the best of my kn	hat the infor	mation give		1		Date	aΔn	proved	4						
2/m. Miller	/						•	•	7	fi	indy/	1991			
Signature						By									
K. M. Miller Div. Opers. Engr.  Printed Name Title June 18,1991 915-688-4834						Title SUPERVISOR DISTRICT 43									
June 18,1991 Date			hone N		-			<b>≠</b> S	UPER	VIS	OH DIST	111			

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.