

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I. Operator **Texaco Inc.** Well API No. **05-067-06287**

Address **3300 N. Butler, Farmington, New Mexico 87401**

Reason(s) for Filing (Check proper box) ☐ Other (Please explain)

New Well ☐ Change in Transporter of: ☐ Dry Gas ☐

Recompletion ☒ Oil ☐ Casinghead Gas ☐ Condensate ☐

Change in Operator ☐

If change of operator give name and address of previous operator **N/A**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Jicarilla "B"</b>	Well No. <b>8</b>	Pool Name, Including Formation <b>South Blanco - PC</b>	Kind of Lease State, Federal or Fee	Lease No. <b>Contr. #68</b>
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Location  
Unit Letter **H** : **1980** Feet From The **North** Line and **660** Feet From The **East** Line  
Section **31** Township **25N** Range **5W** , NMPM, **Rio Arriba** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
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Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<b>Texaco Inc.</b>	<b>3300 N. Butler, Farminton, NM 87401</b>

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?
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If this production is commingled with that from any other lease or pool, give commingling order number: **N/A**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		<b>XX</b>				<b>XX</b>		

Date Spudded <b>4-10-58</b>	Date Compl. Ready to Prod. <b>4-25-58</b>	Total Depth <b>6225'</b>	P.B.T.D. <b>3340'</b>
Elevations (DF, RKB, RT, GR, etc.) <b>6730'</b>	Name of Producing Formation <b>Pictured Cliffs</b>	Top Oil/Gas Pay <b>2634'</b>	Tubing Depth <b>2701'</b>
Perforations <b>2634'-2650', 2693'-2707'</b>			Depth Casing Shoe <b>---</b>

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<b>N/A</b>	<b>10-3/4"</b>	<b>338'</b>	<b>350 sks</b>
<b>N/A</b>	<b>5-1/2"</b>	<b>6224'</b>	<b>750 sks</b>
<b>N/A</b>	<b>2-3/8"</b>	<b>2701'</b>	

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 Tank <b>---</b>	Date of Test <b>---</b>	Producing Method (Flow pump, gas lift, etc.) <b>---</b>
Length of Test <b>---</b>	Tubing Pressure <b>---</b>	Casing Pressure <b>---</b>
Actual Prod. During Test <b>---</b>	Oil - Bbls. <b>---</b>	Water - Bbls. <b>---</b>

**RECEIVED**  
**NOV 29 1990**  
**OIL CON. DIV**  
**DIST. 3**

GAS WELL

Actual Prod. Test - MCF/D <b>1258</b>	Length of Test <b>3 hrs.</b>	Bbls. Condensate/MMCF <b>0</b>	Gravity of Condensate <b>N/A</b>
Testing Method (pilot, back pr.) <b>back pr.</b>	Tubing Pressure (Shut-in) <b>757 psi</b>	Casing Pressure (Shut-in) <b>N/A</b>	Choke Size <b>3/4"</b>

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

**Alan A. Kleier**  
Signature  
**Alan A. Kleier**  
Printed Name  
**11/27/90**  
Date  
**Area Manager**  
Title  
**(505) 325-4397**  
Telephone No.

**OIL CONSERVATION DIVISION**  
**JAN 30 1991**  
Date Approved  
By **Original Signed by FRANK T. CHAVEZ**  
Title **SUPERVISOR DISTRICT #3**

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.

