NO. OF COPIES REC	l		
DISTRIBUTIO	1		
SANTA FE			
FILE			
U.S.G.S.		1	
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR		T	
2000 17/01/ 00-10-		1	

	SANTA FE	NEW MEXICO OIL (NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE	
	FILE	nedoes!	AND	Supérsedes Old C-104 and C-11 Dilective 1-1-65
	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURA	<i>f</i>
	LAND OFFICE	ASTRONIZATION TO TR	ANSFORT OIL AND NATURA	IL GAS
	IRANSPORTER OIL GAS			
	OPERATOR			
1.	PRORATION OFFICE Operator	1		
	TEXACO INC.			
	P. O. Box EE, Cor	tog 60 01331		
	Reason(s) for filing (Check proper box	0. 81321	Other (Please explain)	
	New Well	Change in Transporter of:		ansporter was Gary
	Recompletion	Oil Dry Go	Energy Corp	., now it is Giant
	Change in Ownership	Casinghead Gas Conde	nsule X Industries :	Inc.
	If change of ownership give name and address of previous owner			
II.	DESCRIPTION OF WELL AND	LEASE. Well No.: Pool Name, Including F		
	Mexico Federal O			
	Location	l Basin Dako	ta	deral or Fee Fed. \$F079086
	Unit Letter P : 7	90' Feet From The South Lir	ne and 790' Feet Fr	om The <u>East</u>
	Line of Section 23 To-	wnship 24N Range	6W , NMPM, Ric	Arriba County
I.	Name of Authorized Transporter of Oil			oproved copy of this form is to be sent)
	Giant Industries Name of Authorized Transporter of Car	Inc.	P. O. Box 9156, I	Phoenix A7 85068 proved copy of this form is to be sent)
į	ElPaso Natural Ga		i	
		Unit Sec. Twp. P.ge.	Is as actually connected?	armington, NM 87401
	If well produces oil or liquids, give location of tanks.	P 23 24N 6W	Yes	1975
	If this production is commingled wi	th that from any other lease or pool,	give commingling order number:	
v. 	COMPLETION DATA Designate Type of Completic	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Periorations			Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD				·
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
-				
}				
l				
	TEST DATA AND REQUEST FO	able for this de	fter recovery of total volume of load pth or be for full 24 hours)	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga	infi, etc.)
ľ	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
ŀ	Actual Prod. During Teet	Oil-Bble.	Water - Bble.	Gas - MCF
1.	CAS WELL	I	<u> </u>	
ſ	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
<u>ا</u> استا	CERTIFICATE OF COMPLIANT	DE .	OII CONSER	VATION COMMISSION
-• '	I hereby certify that the rules and regulations of the Oil Conservation		5.2 55N3EN	
1			APPROVED TO THE STATE OF THE ST	
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Transa . Javes		

gionad;	Α, Α.	KLERER
(Signal	we)	

AREA SUPERINTENDENT
(Tale)
APR 2 8 1357

(Date)

SUPERVISOR DISTRICT #

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

Inis 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.