HO. DF COPIES MECETYED			
DISTRIBUTION			
SANTA FE		1	
FILE			
U.S.G.S.		1	
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE		1	

SANTA FE	REQUES'	T FOR ALLOWABLE	Supersedes Old C-104 and C-1
U.\$.G.\$.	ALITHOPIZATION TO TE	AND RANSPORT OIL AND NATURAL (Effective 1-1-65
LAND OFFICE	NOTHONIZATION TO IN	AND NATURAL (JA3
TRANSPORTER OIL			
OPERATOR GAS			
PRORATION OFFICE			
Operator			
TEXACO INC.			
	ortez, CO. 81321		
Reason(s) for filing (Check proper	box)	Other (Please explain)	
New Well	Change in Transporter of:	_ Previous trans	sporter was Gary
Recompletion	OII Dry G	Energy Corp.,	now it is Giant
Change in Ownership	Casinghead Gas Cond	ensate X Industries Ind	· .
If change of ownership give nam and address of previous owner _	r .		
DESCRIPTION OF WELL AN Lease Name	Well No. Pool Name, Including	Formation Kind of Lease	Tion 137 Legse No.
Jicarilla "C"	14E Otero	Gallup State, Federal	Jicarilla Legge No.
Location			Apacite Colle 54
Unit Letter D ;	990 Feet From The N Li	tne and 990 Feet From 1	The W
Line of Section 27	Township 25N Range	5W Dia 3-	wwiha
Time of Section 2.1	Township ZDN Range	5W , NMPM, Rio A	rriba County
	ORTER OF OIL AND NATURAL G	AS	
Name of Authorized Transporter of	· ·	Address (Give address to which approv	•
Giant Industries Name of Authorized Transporter of		P. O. Box 9156, Pho Address (Give address to which approv	penix. AZ 85068
ElPaso Natural (P. O. Box 990, Farm	
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe	
give location of tanks.	D 27 25N 5W	no	
this production is commingled	with that from any other lease or pool,	, give commingling order number:	
, , , , , , , , , , , , , , , , , , , ,	Oli Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty
Designate Type of Comple			
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
	<u></u>		
Perforations			Depth Casing Shoe
	Tiblia Alama	A CPURITING BRACE	
HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD DEPTH SET	SACKS CEMENT
			M B
TOT DATA AND PROVIDE	EOR ALLOWARIE		WERR.
TEST DATA AND REQUEST OIL WELL		after recovery of sotal volume of load oil a epth or be for full 24 hours)	Maria as one in the desiration
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas life	Apr
Length of Test	Tubing Pressure	Casing Pressure	MMK 30100 1
Faudin or Lagi	I NOWING LIASENTA	Pastish Liangma	PIL CONTON
Actual Prod. During Test	Oil-Bbie.	Water - Bbls.	Gas-MCE
* 		<u> </u>	UIST. 3 V.
TAR WEST T			-
AS 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
·	<u> </u>	 	
ERTIFICATE OF COMPLIA	NCE	OIL CONSERVA	TION COMMISSION
havahu aaselfu shas ett	d seculations of the Oil Comment	APPROVED	WE WE DAY INDY
ommission have been complied	mmission have been complied with and that the information given		
ove is true and complete to t	he best of my knowledge and belief.	BY	SUPERVISOR DISTRICT # 3
		TITLE	Anti-Pationic Diouble, sin a
CHANGE THE PROPERTY OF THE PRO		This form is to be filed in compliance with RULE 1104.	
SIGNED: A. A. KLEIER		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		tests taken on the well in accord	lence with RULE 111.
AREA SUPERINTENDENT		All sections of this form must be filled out completely for allowable on new and recompleted wells.	
APR 2 6 1.67		Fill out only Sections I. II.	III. and VI for changes of owner
(Date)	well name or number, or transporte	it, or other such change of condition
		Separate Forms C-104 must completed wells.	be filed for each pool in multiply

NO. OF COPIES REC	EIVED	1	
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SANTA FE		1	
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LAND OFFICE			
IRANSPORTER	OIL		
- THANSTON ER	GAS		
OPERATOR			
		1	

AREA SUPERINTENDENT (Title)
APR 2 8 1967

(Date)

	· · ·			
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104			
SANTA FE	REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-11	
FILE U.S.G.S.		AND Effective 1-1-65		
LAND OFFICE	AUTHORIZATION TO TR	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
I RANSPORTER OIL		,		
GAS		/+ /		
OPERATOR PROPATION OFFICE	-	/		
Operator				
TEXACO INC.		/		
Address				
P. O. Box EE, Co	rtez, CO. 81321			
Reason(s) for filing (Check proper b		Other (Please explain)		
New Well	Change in Transporter of:	Previous tra	nsporter was Gary	
Recompletion	OII Dry G	Energy Corp.	, now it is Giant	
Change in Ownership	Casinghead Gas Conde	ensate X Industries I	nc.	
If change of ownership give name and address of previous owner				
. DESCRIPTION OF WELL ANI	LEASE			
Lease Name	Well No. Pool Name, Including I	Formation Kind of Lea	iseJicarilla Legse No.	
Jicarilla "C"	14E Basin	Dakota State, Fede	ral or FeeApache cont 34	
Location		L DORUCA		
Unit Letter D ; 99	O Feet From The N Li	ne and 990 Feet From	n The W	
Line of Section 27 T	ownship 25N Range 5W	, NMPM, Ric	Arriba county	
		, 1(1)	TITT TOU County	
. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G	AS		
Name of Authorized Transporter of C	Il Or Condensate		roved copy of this form is to be sent)	
Giant Industries	Inc. Ketinois	P. O. Box 9156, Pl	noenix, A7, 85068 roved copy of this form is to be sent)	
Name of Authorized Transporter of C		Address (Give address to which app	roved copy of this form is to be sent)	
E lPaso Natural G		P. O. Box 990, Fa		
If well produces oil or liquids,	Unit Sec. Twp. Pge. D 27 25N 5W	· ·	/hen 10/16/01	
give location of tanks.	27 2311 31	yes	12/16/81	
	rith that from any other lease or pool,	give commingling order number:		
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Resty,	
Designate Type of Complet	ion = (X)		1	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Otl/Gas Pay	Tubing Depth	
		<u> </u>		
Perforations			Depth Casing Shoe	
	TURING CASING AN	D CENENTING DECORD		
HOLE SIZE	······································	D CEMENTING RECORD	SACKS CENERAL	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	-		TO SEIVER	
			44 5 17	
. TEST DATA AND REQUEST I	FOR ALLOWABLE /Test must be a	after recovery of total volume of load or	and much Paud spor exceed ton and	
OIL WELL		epth or be for full 24 hours)	1987	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	WAR CON -	
			WIN. DIV	
Length of Test	Tubing Pressure	Casing Pressure	Choke Start 3	
Actual Pred. During Test	Oli-Bbis.	Water - Bble.	Gas-MCF	
Actual Field Burning 1001				
1		1		
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	
		<u> </u>		
. CERTIFICATE OF COMPLIAN	CE	OIL CONSERV	ATION COMMISSION	
			_AP/RIS 0 1987	
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.		APPROVED.		
		BY	Ja J. Javas	
			SUPERVISOR DISTRICT # 5	
		TITLE	<u> </u>	
and the same of th		11	compliance with RULE 1104.	
SIGNED: A. A. KLEIRE		If this is a request for allo	wable for a newly drilled or despensed anied by a tabulation of the deviation	
(Sim	A 1 1 2 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	II wall, this form must be accome	SUITED BY STREETINGS OF THE CONTRILION	

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