

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

OIL CONSERVATION DIVISION

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Texaco Exploration & Production, Inc.	Well API No. 30 039 25316
Address 3300 N. Butler, Farmington, New Mexico 87401	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name LYDIA RENTZ	Well No. #9	Pool Name, Including Formation WEST LINDRITH, GALLUP-DAKOTA	Kind of Lease State, Federal or Fee	Lease No. SF 079601
Location				
Unit Letter N	: 990'	Feet From The SOUTH Line and 1650'	Feet From The WEST Line	
Section 20	Township 25N	Range 03W	NMPM, RIO ARRIBA	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"/> MERIDIAN OIL	Address (Give address to which approved copy of this form is to be sent) 3535 E. 30th, FARMINGTON NM 87402	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> TEXACO E & P, INC.	Address (Give address to which approved copy of this form is to be sent) 3300 N. BUTLER, FARMINGTON NM 87401	
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 19
	Twp. 25N	Rge. 03W
	Is gas actually connected? YES	When ? 10/93

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

IV. 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	Same Res'v	Diff Res'v
Date Spudded 9-6-93	Date Compl. Ready to Prod. 12-11-93		Total Depth 8290'		P.B.T.D. 8192'			
Elevations (DF, RKB, RT, GR, etc.) 7369'-GR, 7383'-KB	Name of Producing Formation GALLUP-DAKOTA		Top Oil/Gas Pay 7070'-7244'		Tubing Depth 7043'			
Perforations 7070'-7244' GAL, 7989'-7999' UP DK, 8137'-8162' LOW DK			Depth Casing Shoe 8290'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		450'		726 SX			
7-7/8"	5-1/2"		8277'		2337 SX			
	2-7/8"		7043'					

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 12-11-93	Date of Test 12-12-93	Producing Method (Flow, pump, gas lift, etc.) FLOW	
Length of Test 24 16-1/2 HR	Tubing Pressure 210 psi	Casing Pressure 210 psi	Choke Size 071 51993
Actual Prod. During Test 46	Oil - Bbls. 30 94-BBL.	Water - Bbls. 16 634-BBL.	Gas - MCF OIL CON. DIV

GAS WELL

Actual Prod. Test - MCF/D	Length of Test 21-3/4 HR	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 1020 PSI.	Casing Pressure (Shut-in) 1380 PSI.	Choke Size

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.

Ted A. Tipton
Signature **Ted A. Tipton** Area Manager

Printed Name **11-12-93** Title **(505) 325-4397**

Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **DEC 13 1993**

By *Charles E. Holson*

Title **DEPUTY OIL & GAS INSPECTOR, DIST. #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.

