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CONTRIBUTION	
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FILE	
U.S.C.S.	
LAND OFFICE	
TRANSPORTER	OIL <input type="checkbox"/>
	GAS <input type="checkbox"/>
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
 REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
 Supersedes Old C-104 and
 Effective 1-1-85

Operator
 TEXACO INC. Producing Dept. U.S.
 Address

P.O. Box EE, Cortez, CO. 81321

Reasons for filing (Check proper box)

New Well
 Recompletion
 Change in Ownership
 Change in Transporter of:
 Oil
 Gas
 Dry Gas
 Condensate

Other (Please explain)
 Previous transporter was
 Four Corners Pipeline/Giant
 Refining.

Change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name: Navajo Tribe AL 4
 Well Name: Tocito Dome Penn "D"
 Kind of Lease: State, Federal or Free Federal
 State, Federal or Free Federal: 14-20-0603
 8103
 Section: A 510
 Feet from The North: 660
 Feet from The East:
 Township: 26 N
 Range: 18 W
 County: San Juan

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate
 Permian Corp.
 Address: Box 1183, Houston, TX. 77251
 Name of Authorized Transporter of Dry Gas
 Texaco Inc.
 Address: P.O. Box EE, Cortez, CO. 81321
 Date production began: M 27 26N 18W Yes 1964
 This production is commingled with that from any other lease or pool. Give commingling meter number: CTB-137 Amended

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Deepen	Plug Back	Case Tests	Part Test
Equipped	Date Started	Depth to Prod.	Total Depth				P.S.T.D.
Perforated, P.B., R.P., etc.	Name of Perforation	Top of Perforation	Facing Depth				Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed up all able for this depth or be for full 24 hours)

Flow Test	Flow Test	Producing Method (Flow, pump, gas lift, etc.)	
Depth of Test	Tubing Pressure	Casing Pressure	Choke Size
Duration of Flow Test	Oil-Gals.	Water-Gals.	Gas-MCF
Flow Test	Length of Test	Rate, Condensate-MCF	Rate of Condensate
Flow Test	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

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

Alan R. Mory
 (Signature)
 FIELD SUPERINTENDENT
 (Title)
 1/29/85
 Date

OIL CONSERVATION COMMISSION
 APPROVED *[Signature]* 1985
 BY *[Signature]*
 TITLE *[Signature]*
 This 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 deviate 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 ownership, well name or number, or transporter or other such change of condition.
 Separate Forms C-104 must be filed for each pool in multiple-completed wells.