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| U.S.G.S. | | | |
| LAND OFFICE | | | |
| TRANSPORTER | OIL | | |
| | GAS | | |
| OPERATOR | | | |
| PRORATION 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 1-1-65

Operator
TEXACO INC. Producing Dept. U.S.

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

Reason(s) for filing (Check proper box)
New Well [ ]
Recompletion [ ]
Change in Ownership [ ]
Change in Transporter of:
Oil [X]
Dry Gas [ ]
Casinghead Gas [ ]
Condensate [ ]
Other (Please explain)
Previous transporter was Four Corners Pipeline/Giant Refining.

If change of ownership give name and address of previous owner

## DESCRIPTION OF WELL AND LEASE

| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease | Lease No. |
|---|---|---|---|---|
| Navajo Tribe BP | 7 | Tocito Dome Penn "D" | State, Federal or Fee Federal | 14-20-060-8103 |

Location
Unit Letter C ; 510 Feet From The North Line and 1980 Feet From The West
Line of Section 26 Township 26N Range 18W , NMPM, San Juan County

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]
Permian Corp.
Address (Give address to which approved copy of this form is to be sent)
Box 1183, Houston, TX. 77251

Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]
Texaco Inc.
Address (Give address to which approved copy of this form is to be sent)
P.O. Box EE, Cortez, CO.81321

| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. | Rge. | Is gas actually connected? | When |
|---|---|---|---|---|---|---|
| | M | 27 | 26N | 18W | Yes | 1964 |

If this production is commingled with that from any other lease or pool give commingling order number: CTB-137 Amended

## COMPLETION DATA

| Designate Type of Completion – (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Restv. | Diff. Rest |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |

| 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 |
| | | | |
| Perforations | | | 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 top allowables for this depth or be for full 24 hours)

OIL WELL

| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) |
|---|---|---|
| | | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| | | | |
| Actual Prod. During Test | Oil-Bbls. | Water-Bbls. | Gas-MCF |
| | | | |

JAN 31 1985
OIL CON. DIV.
DIST. 3

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 |
| | | | |

## CERTIFICATE OF COMPLIANCE

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.

Alvin R. Many
(Signature)
FIELD SUPERINTENDENT
(Title)
1/29/85
(Date)

OIL CONSERVATION COMMISSION
APPROVED JAN 31 1985, 19
BY Frank T. Chavez
TITLE SUPERVISOR DISTRICT # 3

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 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.