

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

Form C-104
Supersedes Old C-104 and C
Effective 1-1-80

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SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROGRATION OFFICE		

Operator
TEXACO INC. Producing Dept. U.S.

Address

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

Reason(s) for filing (Check proper box)

New Well ☐	Change in Transporter of: Oil ☒ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐	Other (Please explain) Previous transporter was Four Corners Pipeline/Giant Refining.
Recompletion ☐		
Change in Ownership ☐		

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Navajo Tribe	Well Name, Pool Name, Including Formation BP 8 Tocito Dome Penn "D"	Kind of Lease State, Federal or Foreign Federal	Lease No. 14-20-0603 8103
Location Unit Letter M	Feet From The 660 South	Feet From The 660 West	
Line of Section 26	Township 26N	Range 18W	County San Juan

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ 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 ☒ 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 M	Sec. 27	Twp. 26N	Range 18W	Is shut-in daily completed? Yes	When 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 Reservoir	Diff. Res.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Deviation (DB, RKB, RT, GR, etc.)	Name of Producing Formation		True Oil/Gas Pay		Footing 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
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)

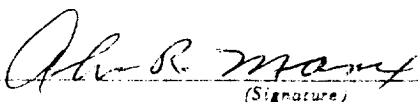
Test Type (New Oil, Run To Tanks)	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Gels.	Water-Gels.
		Choke Size
		Gas-MCF

AS WELL

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

CERTIFICATE OF COMPLIANCE

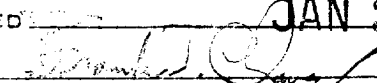
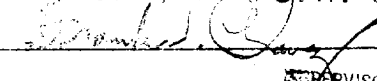
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given is true and complete to the best of my knowledge and belief.


(Signature)

FIELD SUPERINTENDENT
(Title)

1/29/85
(Date)

OIL CONSERVATION COMMISSION

APPROVED:  JAN 31 1985
BY: 
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 multiple completed wells.