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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-110
Effective 1-1-65

B.K.

Operator TEXACO Inc. Prod. Dept. Rocky Mtn. U.S.	
Address P.O. Box 88, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	
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 Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo Tribe "A"	Well No. 6	Pool Name, Including Formation Tecate Dome - Form. "D"	Kind of Lease State, Federal or Fee Federal	4-29-74 8103
Location				
Unit Letter D	660	Feet From The South Line and 1700	Feet From The East	
Line of Section 37	Township 36N	Range 18W	NMPM, San Juan	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"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1888, Farmington, N. Mex. 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 88, Cortez, Colorado 81321					
If well produces oil or liquids, give location of tanks.	Unit 6	Sec. 37	Twp. 36N	Rge. 18W	Is gas actually connected? Yes	When 1964

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

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'tv.	Diff. Res'tv.
Date Spudded 3-10-74	Date Compl. Ready to Prod. 4-14-74	Total Depth 6363		P.B.T.D. 6326					
Elevations (DF, RKB, RT, GR, etc.) 541000 541100	Name of Producing Formation Barker Creek	Top Oil/Gas Pay 6300		Tubing Depth					
Perforations 6300-72, 6314-17, 6324-46, 6330-61		Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE 17 1/2 13 1/4 9 5/8	CASING & TUBING SIZE 13 1/8 9 5/8 7		DEPTH SET 60 1074 6364		SACKS CEMENT 75 700 300				

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 Tanks 4-19-74	Date of Test 4-21-74	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 Hours	Tubing Pressure 300	Casing Pressure 200	Choke Size 20/64
Actual Production During Test 107	Oil - Bbls. 107	Water - Bbls. 110	Gas - MCF 89

GAS WELL

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

VI. 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 above is true and complete to the best of my knowledge and belief.

Alvin R. Moray
Field Foreman

(Title)

4-29-74

(Date)

OIL CONSERVATION COMMISSION

APPROVED 5-1-74, 19

BY Original Signed by Emery G. Arnold

TITLE

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 data 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