NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE FILE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  FROM TOWN OF FICE P. O. BOX 2100, DERVEY, CO. 80201  RESEARCH OF INTERPRETARY  FROM TOWN OF FILE P. O. BOX 2100, DERVEY, CO. 80201  RESEARCH OIL CONSERVATION COMMISSION RESEARCH OIL COMPANY IN TRANSPORT OIL AND NATURAL GAS  H. Change of ownership give name OIL Conservation Recomplishes OIL Conservation OF FELL AND LEASE Uses to previous owner While processes of the pr					
NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE Surveyed and C-110 Surveyed and Surveyed Surv	_				
SANTA FE   REQUEST FOR ALLOWABLE   Supervised Old C-106 and C-110	1				
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AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  LAND OFFICE  TRANSPORTER  OIL  OPERATOR  TEXACO INC.  ASSISTANTION OF ICE  OIL  DISTORATION OF ICE  OIL  Change in Transporter of:  OIL  Change in Conserving Size and Conserving	-		REQUEST F		
TRANSPORTER   OIL   ORDER   OIL   OPERATOR   OPERATOR   OIL   OIL   OPERATOR   OIL   OIL   OPERATOR   OIL	ł		***************************************		
IRANSPORTER   OIL   OR   OIL   OR   OR   OIL   OR   OIL   OR   OIL   O	-	<del></del>	AUTHURIZATION TO TRAF	ASPURT OIL AND NATURAL GAS	
TRANSPORTER   GAS	ŀ	<del></del>			
OPERATON OFFICE		TRANSPORTER			
PROPERTY   TEXACO INC.   Address   P. O. Box 2100, Denver, CO. 80201   Texaco   Te	ŀ				
Content   Cont	.		\$		
Address P. O. Box 2100, Denver, CO. 80201  Resson(x) for filing (Acces proper box) New Well Recompletion Oil Dry Gas Condensore of This process contained to This process contained of This process contained of This process contained to This process cont	<b>"</b>				
P. O. Box 2100, Denver, CO. 80201  Resignit for filing (Check proper load)  Re		TEXACO INC.			/
Resent)   for Illing (Cates proper box)   Change in Transporter of:   Change in Change in Transporter of:   Change in Consequence   Continued Gas   Condensate   Production Texaco Oils   Texaco Oil					
New Well   Change in Transporter of:	١	P. O. Box 2100, D	enver, CO. 80201		·
Recompletion   Oil   Dr. Gas   Dr. Gas   Profile   Pro	Ì	· · · · · · · · · · · · · · · · · · ·		Other (Please explain)	ange of ownership
Content of Content o	Į	75			ange of ownership
II Change of ownership give name and address of previous owner Texaco Oils Inc., P. O. Box 2100, Denver, CO. 80201  I. DESCRIPTION OF WELL AND LEASE  Leave No. Dome Fed 14-26-13 3 WAW Fruitland P.C. Store, Federal or FeeFederal NM31050  Lecation  Unit Letter F : 1760 Feet From The North Line and 1840 Feet From The West  Line of Section 14 Township 26N Range 13W , NNFM, San Jilan County  II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil Or Condensate A Address (Give address to which approved copy of this form is to be sent)  El Paso Natural Gas Co. P.O. Box 990, Farmington, NM 87401  If while production is commingled with that from any other lease or pool, give commingling order number:  V. COMPLETION DATA  Designate Type of Completion — (X)  Dote Spudded Dote Compl. Ready to Prod.  Dote Spudded Dote Compl. Ready to Prod.  Elevations (DF, RKB, RT, CR, etc.)  Name of Authorized Transporter of Casing Size CASING à TUBING SIZE DEPTH SET SACKS CEMENT  V. 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 allow able for this depth of Test  Unit WELL  Date First New Oil Run To Tonks  Date of Test  Tubing Pressure  Casing Pressure  Ca					.s Texaco
DESCRIPTION OF WELL AND LEASE   Well No.   Pool Name, Incitating Formation   State, Federal or FeeFederal   NM31059	Į	Change in Ownership A	Casinghead Gas Condens	ane Tooth Time.	
DESCRIPTION OF WELL AND LEASE   Well No.   Pool Name, Incitating Formation   State, Federal or FeeFederal   NM31059		If change of ownership give name	lawara Oila Tag D	O Day 2100 Day	CO 80301
Lesse Name Dome Fed 14-26-13 3 WAW Fruitland P.C.  State, Federal or FeeFederal NM31059  Location Unit Letter F : 1760 Feet From The North Line and 1840 Feet From The West Line of Section 14 Township 26N Range 13W NMFM, San Juan County  II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Range of Authorized Transporter of Oil Or Condensate Address (Give address to which approved copy of this form is to be sent)  El Paso Natural Gas Co.  It well produces oil or liquids, quite form of the sent of the produced oil or liquids, quite form of the sent of the production is commingled with that from any other lesse or pool, give commingling order number:  V. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded Date Compl. Ready to Prod.  Elevations (BF, RKB, RT, CR, etc.,)  Name of Producing Formation  Tubing, CASING, AND CEMENTING RECORD  HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE (Trest must be after recovery of intal volume of load oil and must be equal to or exceed top allowable for this depth or be for full 28 hours)  Date First New Oil Run To Tonks  Date of Test  Tubing Pressure  Cosing Pressure  Choke Size		and address of previous owner	exaco olis inc., P.	O. Box 2100, Denvel,	CO. 80201
Lesse Name Dome Fed 14-26-13 3 WAW Fruitland P.C.  State, Federal or FeeFederal NM31059  Location Unit Letter F : 1760 Feet From The North Line and 1840 Feet From The West Line of Section 14 Township 26N Range 13W NMFM, San Juan County  II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Range of Authorized Transporter of Oil Or Condensate Address (Give address to which approved copy of this form is to be sent)  El Paso Natural Gas Co.  It well produces oil or liquids, quite form of the sent of the produced oil or liquids, quite form of the sent of the production is commingled with that from any other lesse or pool, give commingling order number:  V. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded Date Compl. Ready to Prod.  Elevations (BF, RKB, RT, CR, etc.,)  Name of Producing Formation  Tubing, CASING, AND CEMENTING RECORD  HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE (Trest must be after recovery of intal volume of load oil and must be equal to or exceed top allowable for this depth or be for full 28 hours)  Date First New Oil Run To Tonks  Date of Test  Tubing Pressure  Cosing Pressure  Choke Size		DECORIDATION OF WELL AND I	EACE		
Location   Unit Letter   F   : 1760   Feet From The North   Line and   1840   Feet From The West	II.		Well No. Pool Name, Including Fo		
Location   Unit Letter   F   1760   Feet From The North   Line and   1840   Feet From The   West			3 WAW Fruitla	and P.C. State, Federal o	FooFederal NM31059
Line of Section 14 Township 26N Range 13W , NMPM, San Jilan County  II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Name of Authorized Transporter of Oil   or Condensate   Address (Give address to which approved copy of this form is to be sent)			J WIW II GICLO		· · · · · · · · · · · · · · · · · · ·
Line of Section 14 Township 26N Range 13W , NMPM, San Jilan County  II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Name of Authorized Transporter of Oil   or Condensate   Address (Give address to which approved copy of this form is to be sent)		F 176	O say say The North Line	and 1840 Feet From The	West
I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Name of Authorized Transporter of Oil		Unit Letter;;;	O Peat From The MOT CIT Zame	1 4.14	
Name of Authorized Transporter of Oil		Line of Section 14 Tow	nship 26N Range	13W NMPM San J	uan County
Name of Authorized Transporter of Oil	1		<del></del>		
Name of Authorized Transporter of Casinghead Gas or Dry Gas (X)  El Paso Natural Gas Co.  P.O. Box 990, Farmington, NM 87401  If well produces oil or liquida, give location of tanks.  If this production is commingled with that from any other lease or pool, give commingling order number:  V. COMPLETION DATA  Designate Type of Completion — (X)  Date Compl. Ready to Prod.  Elevations (OF, RKB, RT, GR, etc.)  Name of Producing Formation  Top Oti/Gas Pay  Tubing Depth  Perforations  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  Oil, WELL  Date First New Oil Run To Tanks  Date of Test  Tubing Pressure  Casing Pressure  Chike Size	II.			S	1
El Paso Natural Gas Co.  If well produces oil or liquids, give location of tonks.  If this production is commingled with that from any other lease or pool, give commingling order number:  V. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc.,) Name of Producing Formation  Top Oil/Gas Pay  Tubing Depth  Perforations  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. 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 allowable for this depth or be for full 24 hours)  Date First New Oil Run To Tanks  Date of Test  Tubing Pressure  Casing Pressure		Name of Authorized Transporter of Oil	or Condensate	Aidress (Give address to which approved	( copy of this form is to be sent)
El Paso Natural Gas Co.  If well produces oil or liquids, give location of tonks.  If this production is commingled with that from any other lease or pool, give commingling order number:  V. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc.,) Name of Producing Formation  Top Oil/Gas Pay  Tubing Depth  Perforations  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. 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 allowable for this depth or be for full 24 hours)  Date First New Oil Run To Tanks  Date of Test  Tubing Pressure  Casing Pressure				Add (Circaldese to which approve	deany of this form is to be sent)
If well produces oil or liquide, give location of tanks.  If this production is commingled with that from any other lease or pool, give commingling order number:  V. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc.)  Date Spudded  Tubing, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL WELL  Date First New Oil Run To Tanks  Date of Test  Tubing Pressure  Casing Pressure  Choke Size		1			
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If this production is commingled with that from any other lease or pool, give commingling order number:  V. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded  Date Compil. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc.)  Designate Type of Completion — (X)  Date Compil. 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  Depth Casing Shoe  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL, WELL  Date First New Oil Run To Tanks  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size		If well produces oil or liquids,	Unit Sec. Twp. rige.	is dos detadify connected?	
V. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc.)  Perforations  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL WALL  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Producing Method (Flow, pump, gas lift, etc.)  Choke Size  Choke Size  Choke Size  Choke Size				<u> </u>	
Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc.)  Perforations  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. 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 allowable for this depth or be for full 24 hours)  Producing Method (Flow, pump, gas lift, etc.)  Casing Pressure  Case MCF			h that from any other lease or pool,	give commingling order number:	
Date Spudded  Date Compl. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc.)  Name of Producing Formation  Top Oil/Gas Pay  Tubing Depth  Depth Casing Shoe  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  Oil. WELL  Date First New Oil Run To Tanks  Date of Test  Tubing Pressure  Casing Pressure	٧.			New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.
Elevations (DF, RKB, RT, GR, etc.;) Name of Producing Formation  Tubing Casing Formation  Tubing Casing Shoe  Tubing Casing And Cementing Record  Hole Size Casing & Tubing Size Depth Set Sacks Cement  Casing & Tubing Size Depth set Sacks Cement  V. 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 allowable for this depth or be for full 24 hours)  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		Designate Type of Completio	n = (X)		
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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  Gas-MCF		HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
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  Gas-MCF					
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  Gas-MCF					
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  Gas-MCF					
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  Gas-MCF			<u> </u>	<del></del>	
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  Vacca Phis	V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a)	fter recovery of total volume of load oil ar	id must be equal to or exceed top allow-
Length of Test  Tubing Pressure  Casing Pressure  Choke Size  Gas-MCF				Producing Method (Flow, pump, gas lift,	etc.)
Length of Test Juding Pressure Cashing 1 to 1 t		Date First New Oil Run To Tanks	Date of 1est	, , , , , , , , , , , , , , , , , , , ,	
Length of 1981			Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test Oil-Bbis. Water-Bbis. Gas-MCF		Length of Test	t anud Liasama		
Actual Prod. During 1981		Assert Peed Poster Tool	Otto Bbla.	Water-Bbls.	Gas-MCF
		Actual Prod. During 1 081			
		l		<del> </del>	
GAS WELL		GAS WELL			

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

## VI. CERTIFICATE OF COMPLIANCE

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

TEXACO INC. As Operator for TEXACO PRODUCING INC.

	(Signature)	•
AREA	SUPERINTENDENT	
	(Title)	

OIL CONSERVATION COMMISSION JUN 2 8 1997

APPROVED.

SUPERVISION 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.

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