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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	3
OPERATOR		
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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

Operator SAGUARO OIL COMPANY	
Address P. O. Box 51, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Re-entry

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name STAVAR-NAVAJO	Well No. 1	Pool Name, including Formation NORTH TOCITO DOME	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter M : 660 Feet From The SOUTH Line and 660 Feet From The WEST				
Line of Section 34 Township T27N Range 18W, NMFM, SAN JUAN County				

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
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)
WESTERN HELIUM	P. O. Box 296, Shiprock, New Mexico
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
	YES 4-20-75

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)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
		X						
Date Spudded 1-20-75	Date Compl. Ready to Prod. 4-15-75	Total Depth 7307	P.B.T.D. 6828					
Elevations (DF, RKB, RT, GR, etc.) 5624 Gr.	Name of Producing Formation MISSISSIPPIAN	Top Oil/Gas Pay 6217	Turing Depth 6803					
Perforations 6717-20/6730-40/6742-44/6752-58/6763-74/6778-86/6794-6802		Depth Casing Shoe 7307						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/4	13 3/8	403	350					
12 1/4	9 5/8	4500	DV 300sk. top-300sk. bo					
8 3/4	7"	6591	250 (bottom					
6 1/4	5" line	6518-7307	75					

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

GAS WELL

Actual Prod. Test-MCF/D 2000	Length of Test 24 hour	Bble. Condensate/MMCF -0-	Gravity of Condensate
Testing Method (pitot, back pr.) back pr.	Tubing Pressure (shut-in) 3015#	Casing Pressure (shut-in) 800#	Choke Size 1"

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.

*John Cunningham*  
MANAGER  
MAY 11, 1975

OIL CONSERVATION COMMISSION  
MAY 20 1975  
APPROVED  
BY Original Signed by Emery C. Arnold  
SUPERVISOR DIST. #3

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 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.