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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

		OTHA	NSPC	HI UIL	AND NAT	UHAL GA	் । யார்	ы ы.				
O penior Texaco Ir	nc.				Well API No. 30-045-06912							
ddress 3300 N. Butle	······································	arming	gton,	, New	Mexico	87401						
eason(s) for Filing (Check proper box)			.		Othe	(Please explai	in)					
lew Well	Oil	Change in	Transpor Dry Gas									
ecompletion L	Casinghead	77	Conden									
change of operator give name	thwes	t Pine	-line	Corpo	oration	, 3539 I	E. 30tl	n St., Fa	rmingt	on, NM		
			<u></u>	2_3022	<u> </u>							
L. DESCRIPTION OF WELL .	AND LEA	Well No.	Pool Na	ng Formation			of Leave	se No.				
Blanco	Mesa Ve	rde	State	Federal or Fee	114911	1D8463						
Location Unit Letter B	. 7	90	Feet Fr		VORTH.	and18	50F	Seet From The	East	Line		
Om Deal		ирм,	S	an Juan	n Juan County							
Section 1 Townshi		7N	Range	9 W		TrM1		<u> </u>				
II. DESIGNATION OF TRAN	SPORTE	or Conder			RAL GAS	address to wh	ich approve	d copy of this for	m is to be sen	<u></u>		
Name of Authorized Transporter of Oil Meridian Oil		or Cotioes	JA41C	(X)								
Name of Authorized Transporter of Casin	ghead Gas		or Dry	3535 E. 30th, Farmington, NM 87401 Address (Give address to which approved copy of this form is to be sent)								
	El Paso Natural Gas Co.								ngton, NM 87499			
If well produces oil or liquids, give location of tanks.	Unit 1 B	Sec.	Twp. 27N	•	ls gas actuali	y connected?	Whe	n 7				
f this production is commingled with that					ling order num	ber:						
V. COMPLETION DATA					-, 		-,			Live B		
Designate Type of Completion	- (X)	Oil Wel	11 (Gas Well	New Well	Workover	Deepen	Plug Back	Same Resiv	Diff Resiv		
Date Spadded		ipl. Ready t	I to Prod.		Total Depth	1		P.B.T.D.		<u> </u>		
Elevations (DF, RKB, RT, GR, etc.)	ations (DF, RKB, RT, GR, etc.) Name of Producing Formation							Tubing Depti	Tubing Depth			
Perforations		Depth Casing Shoe										
•												
					CEMENTI	NG RECOR			ACKS CEM	NT		
HOLE SIZE		ASING & T	DRING	<u> 512 E</u>	-	DEP IN SET		- 	AONS OLIVI			
V. TEST DATA AND REQUE	ST FOR	ZOLLA	/ABLF									
OIL WELL (Test must be after	recovery of	total volum	e of load	oil and mus	it be equal to c	r exceed top al	lowable for	this depth or be f	or full 24 hou	rs.)		
Date First New Oil Run To Tank	Date of T				Producing N	lethod (Flow, p	ownp, gas lý	t, etc.)				
Local of Total	th of Test Tubing Pressure						Casing Pressure 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
Length of Test	I uping r	100 SOILE				र्मेक क्षित्र क	11 Q 6s	11 1				
Actual Prod. During Test	Oil - Bbl	s.			Water - Bibl	1 888	1991.	Las- MCF				
GAS WELL						H CON	V. DIV	Î.				
Actual Prod. Test - MCF/D	Length o	of Test	,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		Bbls. Cond	neate/MMCF	. 3	Gravity of C	Condensate			
	75.50	Pressure (SI			- Casing Pre-	sure (Shut-in)		Choke Size				
Testing Method (puot, back pr.)	I dotag	r (essure (3)	iiw-ui)		Casing 110							
VI. OPERATOR CERTIFI	CATE C	OF COM	1PLIA	NCE			NICED	VATION	אופועום	ואר		
I hereby certify that the rules and reg	gulations of t	he Oil Con	servation	.ve		OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.						JAN 3 0 1991 Date Approved						
	,					ra whhina		. \	1 /			
alan a Blew	/12	47/			Ву	By But ? Chang						
Signature Alan A. Kleier	Signature						SUPERVISOR DISTRICT #3					
Printed Name 1-28-91		(505)	Tide 325-	4397	- ∐ Tit'	e						
Dale			lelephone		1							
			.,,									

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.

 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

 4) Separate Form C-104 must be filled for each pool in multiply completed wells.

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Anesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.		TO TRA	NSP	ORT OIL	AND NA	TURAL GA					
Operation Texaco Explor	ation	& Pro	oduc	nc.		Well	30-045-06912				
Address 3300 N. Butle	er, F	arming	gton	, New	Mexico	87401			743 003	16.	
Reason(s) for Filing (Check proper box) New Well Recompletion Change in Operator	Oil Casinghe	Change in	ì	. 🗆	Odi	ня (Please expl	ain)				
If change of operator give name name and address of previous operator	aco I	nc.	330	0 N. B	utler,	Farming	gton, 1	NM 87401	•		
II. DESCRIPTION OF WELL	AND LE	ASE									
Lease Name Blanco		Well No.		ng Formation Mesa '			of Lease Federal or Fee	1	IND8463		
Location Unit LetterB	- :	790	_ Feet Fr	om The No	orth Lin	m: and18	50 F	eet From The _	East	Line	
and 1 and 27N a QW area. Com Tunn									County		
Ш. DESIGNATION OF TRAN	SPORTE			D NATU	+		=======================================	·			
Name of Authorized Transporter of Oil Meridian Oil		or Condex	sale	Address (Give address to which approved copy of this form is to be sent) 3535 E. 30th, Farmington, NM 87401							
Name of Authorized Transporter of Casing El Paso Natural Ga	head Gas S CO.	XX	or Dry	Gas [Address (Give address to which approved copy of this form is to be sent) P.O. BOX 990, Farmington, NM 87499						
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 1	Twp. 27N		le gas actual!	y connected?	When	7			
If this production is commingled with that in IV. COMPLETION DATA	from any ot	her lease or	pool, giv	e commingl	ing order num	ılxır:					
	(V)	Oil Well		Gas Well	New Well	Workciver	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Designate Type of Completion - (X) Spudded Date Compl. Ready to Prod.						<u> </u>	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	vations (DF, RKB, RT, GR, etc.) Name of Producing Formation					⁵ ay		Tubing Depth			
Perforations	L				Depth Casing Shoe						
		TIDING	CASII	NG AND	CEMENT	NG RECOR					
HOLE SIZE	·	SING & TU			CEMENT	DEPTH SET		S	ACKS CEMI	ENT	
	 										
V. TEST DATA AND REQUES	T FOR A	ALLOW	ABLE					<u> </u>	,,		
OIL WELL (Test must be after re	T		of load o	oil and must					g sull 24 shape	*)t :=	
Date First New Oil Run To Tank	Date of Te	est			Producing Ni	ethod (Flow, pi	imp, gas lyg, i	에 에 (한 년) 1.		n []	
Length of Test	Tubing Pressure				Casing Press	u re	6-7	Choke Size			
Actual Frod. During Test	. During Test Oil - Bbls.					i.		Gar-MCF			
GAS WELL									1. 3		
Actual Prod. Test - MCF/D	Length of Test				Bbls. Conde	nute/MMCF		Gravity of Condensate			
lesting Method (pitol, back pr.)	Tubing Pressure (Shui-in)				Casing Press	aire (Shut-in)		Choke Size			
VI. OPERATOR CERTIFICATE OF COMPLIANCE 1 hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					OIL CONSERVATION DIVISION						
is true and complete to the best of my knowledge and belief.						Date ApprovedAUG 1 5 1991					
Jec Jimes						By Bull Chang					
Title 7-29-91 (505)325-4397						SUPERVISOR DISTRICT #3					
Date			ephone N								
		سعه بمناسبة بنقار			11						

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DISTRICT I

P.O. Box 1980, Hobbs, NM 88241-1980

DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88211-0719 DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISIÓN

P.O. Box 2088

Form: C-104 Revised February 10,1994 Instructions on back Submit to Appropriate District Office 5 Copies

<u>DISTRICT IV</u> P.O. Box 2088	3, Santa Fe,	NM 87504-20			anta Fe, Nev WABLE AN			88 (N TO TRANSP		MENDED	REPORT		
			erator Name						RID Number				
		GAS COMPA	NY						131994				
3300 N. Buti	er Ave., Su	ite 100 F	armington		NM 8	7401		³ Re	ason for Filing CH	Code			
	Number 04506912					ool Name							
Property Code						Property Name				72319 ⁹ Well No.			
10	011142	176.59			····	BLANCO			1				
Surfac Ul or lot no.	e Locatio	n Township	Range	Lot.idn	Feel From T	he North	South Line	Feet From The	East/West Line				
В	01	T27N	R09W	Loc. Idi	790		ORTH	1850	Easuvvest		County AN JUAN		
11 Bottor	n Hole Lo	cation											
UI or let no.	Section	Township	Range	Lot.ldn	Feet From T	he North	South Line	e Feet From The East/West L		Line	County		
Lse Code F	¹³ Producir	ng Method Cod	8 14 Gas Co	nnection Date	16 C-129 F	Permit Numbe	18	C-129 Effective Date	17	C-129 Expir	ation Date		
	Gas Tra					POD							
18 Transport OGRID		¹⁹ T		ansporter Name and Address			21 O/G	22 POD ULSTR Location and Description			n		
014538	0174538 MERTOJAN 3535 E. 30th, F			INC. igton NM	2	5084 10 O		B 01 27N/09W					
007056	007056 EL PASO NATURAL GAS P.O. Box 990, Farmington NM					2508430 G			B 01 27N/09W				
8901		GIANT R	EFININ	G COMO	ANY		:						
L 727	8	P.O SCOTTSI	. BOX	12999 47 0521	67						,		
		3601131	1 Pl L L 1	42 052	01								
Produce	ed Water						lii						
²³ F					24	POD ULSTR	Location and						
Well Co	mpletion	Data											
					al Depth 1498		²⁸ PBTD		Perforation	ons			
30 HOLE SIZE		³¹ CAS	ING & TUBIN	IG SIZE	32 DEPTH SE			³³ SACI	³³ SACKS CEMENT				
0								0					
								0					
Well Te	st Data					<u> </u>		· ···· · · · · · · · · · · · · · · · ·		······································			
³⁴ Date Ne	w Oll	³⁵ Gas Deli	very Date	36 Dat	e of Test	37 Lengt	r of Test	38 Tubing Pres	ssure 3	⁹ Casing Pr	essure		
40 Choke	40 Choke Size 41 Oil - Bbls. 42 Water				r - Bbls.	⁴³ Ga	- MCF	44 AOF 45 Test Method			hod		
Division have	been complied	s and regulations I with and that the best of my knowle	s information giv		PLACE AND ADMINISTRATION OF THE PLACE AND ADMINISTRATION OF TH			ONSERVAT		ISION			
Signature Rached Flindi & TAT						Approved By: SUPERVISOR DISTRICT #5							
Printed Name Ted A. Tipton						Title:							
itle Operating Unit Manager						Approva	l Date:	t & jul, 	1995				
)ate 5/8/	/95		Telephor	ne 325	-4397				=====		l		
7 If this is a che 022364 - TEX		or fill in the OGRII P., INC.		ame of the prev	·	Ted A. Tiptor Printed Na			nit Manager Title	ſ	5i/8/95 Date		
											11		