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

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Texaco Exploration & Production Inc.		Well API No. 30-045-07955
Address 3300 N. Butler, Farmington, New Mexico 87401		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: <input checked="" type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Application for Temporary Approval on C104 Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> to perform an initial packer leakage test without venting the gas.		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name H.J. Loe B Federal	Well No. 3	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee	Lease No. NM014378
Location Unit Letter M : 890 Feet From The South Line and 790 Feet From The West Line Section 23 Township 29N Range 12W , NMPM , San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate: <input checked="" type="checkbox"/> Meridian Oil, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4289 Farmington, NM 87499-4289					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Texaco E. & P. Inc.	Address (Give address to which approved copy of this form is to be sent) 3300 N. Butler Farmington, NM 87401					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 23	Twp. 29N	Rge. 12W	Is gas actually connected? Yes	When? 11/01/66

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. 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			
Perforations PC Completion: 1520'-1550', 1618'-1622'; 4 JSPE (9-15-92)					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 (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for oil well case for 24 hours.)		
Date First New Oil Run To Tank	Date of Test	Producing Method (Flowing or Shut-in)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS 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

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

Packed Hindi / TAT
Signature
Ted A. Tipton Area Manager
Printed Name
9/16/92 Title
(505)325-4397
Date
Telephone No.

OIL CONSERVATION DIVISION

Date Approved **SEP 17 1992**
By **Original Signed by CHARLES GHOLSON**
Title **DEPUTY OIL & GAS INSPECTOR, DIST. #3**

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 filed for each pool in multiply completed wells.

TEXACO

FORM G-44

Date 9/16/92

To NEW MEXICO OIL CONSERVATION DIV.

From _____

- | | | |
|---|---|--|
| <input type="checkbox"/> Please | <input type="checkbox"/> Prepare reply for my | <input type="checkbox"/> As requested |
| <input type="checkbox"/> Attend to | <input type="checkbox"/> signature | <input type="checkbox"/> For your comments |
| <input type="checkbox"/> Note and return | <input type="checkbox"/> Send me information | <input type="checkbox"/> and suggestions |
| <input type="checkbox"/> Note and forward | <input type="checkbox"/> required to answer | <input type="checkbox"/> Does attached meet |
| <input type="checkbox"/> to files | <input type="checkbox"/> For your information | <input type="checkbox"/> with your approval? |
| <input type="checkbox"/> See (phone) me | <input type="checkbox"/> As per conversation | <input type="checkbox"/> For signature |
| <input type="checkbox"/> re attached | <input type="checkbox"/> Telephone message | |

Attached C104 is a request for
Temporary Approval to perform
an initial packer leakage
test without venting the gas.

As per phone conversation
between Ernie Bush and
Paul Berhost on 9/14/92.

W/11/92 From Ernie Bush to Tony
+ back to Ernie Bush
+ back to Ernie Bush