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١	NO. OF COPIES RECEIVED			
	DISTRIBUTION	NEW MEXICO OIL CO	DISERVATION COMMISSION	Form C-104
- 1	SANTA FE	REQUEST F	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Ellective 1-1-65
ŀ	FILE		AND	7
١	U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL GAS	/
ļ	LAND OFFICE			
	FRANSPORTER OIL GAS			
	OPERATOR			
1.	PRORATION OFFICE	<u> </u>		/
	TEXACO INC.			
	Address P. O. Box 2100, Denver, CO. 80201			
- 1	Reason(s) for filing (Check proper box)		Other (Please explain)	
- 1	New Well	Change in Transporter of:	This report ch	ange - Ownership
	Recompletion	Oil Dry Gas		s Inc. c. "evaco
	Change in Ownership \overline{X}	Casinghead Gas Condens	sate Praucing Inc.	
	If change of ownership give name , and address of previous owner	Texaco Oils Inc., P.	O. Box 2100, Denver,	CO. 80201
11.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Navajo Lease No.			
	Dome Navajo 22-22-	_ _		Fee Allotted 20-5357
	Unit Letter P; 660 Feet From The South Line and 660 Feet From The East			
	Line of Section 22 Tov	vaship 22N Range	7W , NMPM, Sando	oval County
	DESIGNATION OF TRANSPORT	TED OF OUT AND NATURAL GA	6	
11.	Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GA	Address (Give address to which approved	copy of this form is to be sent)
	Giant Refinery		P.O. Box 9156, Phoe Address (Give address to which approved	enix, AZ 85068
	Name of Authorized Transporter of Cas	singhead Gas X or Dry Gas	Address (Give address to which approved	copy of this form is to be sent)
			P.O. Box EE, Corte	z, CO. 81321
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? When	
	give location of tanks.	P 22 22N 7W		
	If this production is commingled wi	th that from any other lease or pool,	give commingling order number:	
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.
	Designate Type of Completic			
	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			Depth Casing Shoe
	TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	NOCE SIZE			
			<u>j</u> i	
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)			
	OIL WELL	ante for this de	Producing Method (Flow, pump, gas lift,	and the same
	Date First New Oil Run To Tanks	Date of Test	Producing Method (1 102) Pampy 220 Mys	
	Length of Test	Tubing Pressure	Casing Pressure	Gibble Size
		Oil-Bbls.	Water - Bbls.	Gas-MCPU/2
	Actual Prod. During Test	OII - BDIB.		C 15 6 200 1
	GAS WELL			
	Actual Prod. Teet-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
	, CERTIFICATE OF COMEDMANCE		June 30	IN 26 1987
	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.		APPROVED	
			BY	many
			AMPROVICTON DISCRICT # 8	

TEXACO INC. As Operator for TEXACO PRODUCING INC.

8IGNED: A. A. KLEIRR

(Signature)

AREA SUPERINTENDENT (Title) 6/19/87

(Date)

This form is to be filed in compliance with RULE 1104.

If this is a request for sllowable 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, weil 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.