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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

SANTA FE	REQUEST F	FOR ALLOWABLE	Supersedes Old C-104 and C-11
FILE	_	AND	Effective 1-1-65
U.S.G.S.	. AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL O	SAS
OIL	1 .	DECEIV	E IS
TRANSPORTER GAS	1		
OPERATOR]	nn m	ש
PRORATION OFFICE		MAR 1 4 1984	
TEXACO Inc.,		OIL CON. D	IV.
Address		DICT	ν
P. O. Box 2100), Denver, Colorado 8	0201	
Reason (1) for filing (Check proper box)	Other (Please explain)	
New W.	Change in Transporter of:		
Recompletion KX	OII Dry Gas		
Change in OPERATOR	Casinghead Gas Conden	sare	
f change of ownership give name	ome Petroleum Corp.,	1625 Broadway, Den	ver, Colorado
and address of previous owner			
DESCRIPTION OF WELL AND	LEASE		
Lease Name	Well No. Pool Name, Including Fo		1 20000 ///
Location	1 B. BLANCO - PICTI	OREP CLIFFS Side, 1 sales	or Fee FeDetA
	O Feet From The NORTH Line	790	rhe_WEST
Unit Letter : 100	C Feet From The TVDT [] Line	e dna reet rom	he OCOT
Line of Section 33 To	waship 25N Range	3W , NMPM, RIO	Arriba County
DESIGNATION OF TRANSPOR' Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GA	S Address (Give address to which appro-	ued conv of this form is to be sent?
Name of Admostred Transporter of O.S.	of condensate	The state of the s	year copy of this form is to be semi,
Name of Authorized Transporter of Ca	singhead Gas or Dry Gas	Address (Give address to which appro-	ved copy of this form is to be sent)
EL PASO NATURAL	6AS Co.	P.O. BOX 1492 EL PASO, TEXAS 79978	
If well produces oil or liquids,	Unit Sec. Twp. Ege.	Is gas actually connected? Who	
give location of tanks.	1 1 1	1/65	5-4:58
	ith that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Resty.
Designate Type of Completi	on - (X)		
Date Spudded	Date Compl. Ready to Frod.	Total Depth	P.B.T.D.
Elevations (DF, RKE, RT, GR, etc.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations		1	Depth Casing Shoe
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	·		
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a)	fter recovery of total volume of load oil	and must be equal to or exceed top allow
OIL WELL	able for this de	pth or be for full 24 hours)	
Date First New Cil Run To Tanks	Date of Tes:	Producing Method (Flow, pump, gas li	, e.c.,
Length of Test	Tubing Pressure	Casing Pressure	Choire Size
	,		
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas - MCF
		MAN 5 7 10	A Company of the Comp
		e ^{ent} ig d E − 1 × 1	
GAS WELL	11	L Phile Condenses OMCF	Gravity of Condensate
	Length of Test	Bbls, Condensate/MMCF	Gravity of Contamination
Training Method (pitut, back pr.,	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choxe Size
•		•	
CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	ATION COMMISSION
		MAY 07 1984	
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	, 1
Commission have been complied above is true and complete to th	with and that the information given e best of my knowledge and belief.	BY	
•	ator for Texaco Oils	Inc. SUPER	ोक्स कार्यासूर्य # 3
4		TITLE	
		Il This form is to be filed in	compliance with RULE 1104.

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N TOLE

Lo. R. Mary (Signature)

Field Sunt.

V.

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CDP

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.

