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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
FOR TEST OIL ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65



I.

Operator Tesoro Petroleum Corporation	
Address 533 Busby Drive, San Antonio, Texas 78209	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	TRANSPORTER CHANGED FROM SHELL OIL COMPANY TO SHELL PIPE LINE CORPORATION EFFECTIVE 12/31/69
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	
Casinghead Gas <input type="checkbox"/>	
Dry Gas <input type="checkbox"/>	
Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Santa Fe Railroad	Well No. 16	Pool Name, Including Formation Undesignated - Dakota Sand	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter C	330	Feet From The North	Line and 2310	Feet From The West
Line of Section 7	Township 17N	Range 8W	, NMPM, McKinley County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Shell Oil Company	Address (Give address to which approved copy of this form is to be sent) Farmington, New Mexico	
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)	
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 7
	Twp. 17N	Rge. 8W
Is gas actually connected? When		

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
Date Spudded 10/23/68	Date Compl. Ready to Prod. 11/25/68	Total Depth 2708	P.B.T.D. 2585' RKB					
Elevations (DF, RKB, RT, GR, etc.) RKB 6922' G.L. 6913'	Name of Producing Formation Dakota	Top Oil/Gas Pay 2520'	Tubing Depth 2515' RKB					
Perforations 2521-33' and 2535-38' RKB. 4 bullets per foot - 60 shots			Depth Casing Shoe 2569' RKB.					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		137' RKB		100 sacks Class "A"			
7-7/8"	5-1/2"		2569' RKB.		100 sacks Class "A"			
	2-3/8"		2515' RKB					

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 11/25/68	Date of Test 11/27/68	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs.	Tubing Pressure 240	Casing Pressure 510	Choke Size 20/64"
Actual Prod. During Test 92 Bbls.	Oil-Bbls. 81 Bbls.	Water-Bbls. 11 Bbls.	Gas-MCF 81 Estimated

GAS WELL

Actual Prod. Test-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

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.

Walter C. Quinn

(Signature)

General Superintendent

(Title)

December 9, 1968

(Date)

OIL CONSERVATION COMMISSION

DEC 20 1968

APPROVED _____, 19____

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.