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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PORATION OFFICE	

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-85

Operator
Texaco Inc., Operator for Texaco Producing Inc. (TPI)

Address
4601 DTC Blvd., Denver, Colorado 80237

Reason(s) for filing (Check proper box)

New Well
Recompletion
Change in Ownership

Change in Transporter to:
Oil Dry Gas
Casinghead Gas Condensate

Other (Please explain)
Change of Operator from Getty Oil Company to Texaco Inc. (Operator for TPI)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Cicarilla C	Well No. 26	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fed. Ind.	Lease No. Contr. 34
Location Unit Letter I : 1850 Feet From The South Line and 720 Feet From The East				
Line of Section 21	Township 25N	Range 5W	NMMPN Rio Arriba	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Permian Corporation P.O. Box 1528, Denver, CO 80201
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Texaco Inc. 4601 DTC Blvd., Denver, CO 80237
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rec.	Is gas initially connected? When Yes

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Reavt.	Diff. Reavt.
Date Spudded	Date Comp. Ready to Prod.		Total Depth				P.B.T.D.	
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil-Cas. Pay				Tubing Depth	
Perforations							Depth Casing Shoe	

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of fluid off 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure MAR 19 1985 Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls. 12 C. S. 3000 ft. NCF Dist. 0

GAS WELL

Actual Prod. TWhr-MCF/D	Length of Test	Oil, Condensate/MMCF	Quantity of Condensate
Testing Method (p/psi, back pr)	Tubing Pressure (psi-lb)	Casing Pressure (psi-lb)	Choke Size

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.


(Signature)

District Manager / Farmington

(Title)

March 8, 1985

(Date)

OIL CONSERVATION COMMISSION

MAR 14 1985

APPROVED


Frank J. O'Conor
SUPERVISOR DISTRICT # 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 1, 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 owned wells.