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MO. OF COPIES WEEKSWEE			•	
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104			
FILE .	REQUES	T FOR ALLOWABLE	Supersedes Old C-104 and C- Effective 1-1-65	
U.S.G.S.	AUTHORIZATION TO TE	AND RANSPORT OIL AND NATURAL (CAS	
LAND OFFICE	AUTHORIZATION TO TE		1 0 nn	
I RANSPORTER OIL		DECE	IVEM	
GAS		<i>I</i> /\		
OPERATOR		MAR 1	4 1984	
PRORATION OFFICE Operator				
TEXACO Inc.,			OIL CON. DIV.	
P. O. Box 210	O, Denver, Colorado	80201	. 3	
Reason for filing (Check proper bo	ex)	Other (Please explain)		
New Wo	Change in Transporter of:			
Recompletion		Gas		
Change in OPERATOR	Casinghead Gas Con	densate		
If change of ownership give name and address of previous owner	Dome Petroleum Corp	., 1625 Broadway, Der	nver, Colorado	
DESCRIPTION OF WELL AND	Vell No. (Pool Name, Including	Formation Kind of Lea	se Lease No	
Lease Name		· ·	al or Fee FEDETAL	
Location	1 5 50. BIHNCE -	- MCTOTED CLIFFS		
	50 Feet From The NORTH	Line and 790 Feet From	The WPST	
Unit Letter C : 18				
Line of Section 21 T	ownship 25N Range	3W , NMPM, AC	Count	
DESIGNATION OF TRANSPORMENT OF COMMENT OF Authorized Transporter of Comments o	RTER OF OIL AND NATURAL or Condensate	GAS Address (Give address to which appr	oved copy of this form is to be sent)	
	10 E	Address (Give address to which appr	oved copy of this form is to be sent)	
	Casinghead Gas or Dry Gas 🔀			
EL PASO NATURAL I	Unit Sed. (Twp. P.ge.	Po. Box 1492 EL PAS Is gas actually connected?	hen 19978	
If well produces oil or liquids, cive location of tanks.	Cont poet.	11.7	3358	
	with that from any other lease or po	of give commingling order number:		
COMPLETION DATA	with that from any other lease of po			
	Cil Weli Gas Wel	New Well Workover Deepen	Plug Back Same Resty. Diff. Re	
Designate Type of Comple		7	P.B.T.D.	
Date Spudded	Date Compl. Ready to Frod.	Total Depth	P.B.1.D.	
	Name of Froducing Formation	Tep Oil/Gas Pay	Tubing Depth	
Elevations (DF, Rh.b. RT, GR, etc.	Name of Froadcing rotatetton	100 017 003 1 07		
Ferforgues			Depth Casing Shoe	
Fettorations				
	TUBING, CASING,	AND CEMENTING RECORD		
HC_E SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	:			
	i			
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be to the formal	be after recovery of total volume of load o a depth or be for full 24 hours)	il and must be equal to or exceed top a	
OIL WELL	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
Date First New OD Run To Tanks				
Length of Tost	Tuning Pressure	Casing Pressure	Chore Size	
	!			
Actual Prod. During Test	OiBbis.	Water - Bbis.	Gas-MCF	
; I		M Y 0 21984		
		year.	- 4	
GAS WELL			Gravity of Condensate	
Nerus, Proc. Test-MCF/Z	Length of Test	BEIS. Condensate MISE	Gravity of Concensate	
		Cosing Pressure (Shut-in)	Choke Size	
Trating Method (pitot, back pr.)	Tuning Pressure (Shut-in)	Cosing Pressure (Bode-14)	0	
		011 00115701	ATION COMMISSION	
CERTIFICATE OF COMPLIA	ANCE	NA AV	vation commission 0.7-1984	
		1	2 () () () () () () () ()	

VI

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

TEXACO Inc. as Operator for Texaco Oils

Wal. Mart (Signature) Field Sunt.

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3-9-84 Ta.e

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.

SUPERVISOR DISTRICT # 3

APPROVED.

Inc.

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 netered wells.