

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Texaco Exploration & Production Inc.	Well API No. 30-039-21079
Address 3300 N. Butler, Farmington, New Mexico 87401	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Paul Williams	Well No. 3	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee <input checked="" type="checkbox"/>	Lease No. 897620
Location Unit Letter F : 1575' Feet From The North Line and 1555' Feet From The West Line Section 35 Township 26N Range 6W , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Meridian Oil, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4289, Farmington, NM 87499-4289	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Texaco E. & P. Inc.	Address (Give address to which approved copy of this form is to be sent) 3300 N. Butler, Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 35
	Twp. 26N	Rge. 6W
	Is gas actually connected? Yes	When ? 11-25-75

If this production is commingled with that from any other lease or pool, give commingling order number: **PC-784**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X		X				
Date Spudded 5-05-75	Date Compl. Ready to Prod. 12-11-92		Total Depth 7177'		P.B.T.D. 7144'			
Elevations (DF, RKB, RT, GR, etc.) KB-6351' 6338' 6L	Name of Producing Formation Mesa Verde		Top Oil/Gas Pay 4224'		Tubing Depth 4/ 4980'			
Perforations 4698' - 4948'						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		375' 362		245 sks			
7-7/8"	4-1/2"		7177'		1135 550 sks.			
	2-3/8"		4984'					

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 for full 24 hours)			
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size FEB 19 1993
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - Bbls. OIL CON. DIV
DIST. 2			

GAS WELL

Actual Prod. Test - MCF/D 475	Length of Test 13 hrs.	Bbls. Condensate/MMCF 3.5	Gravity of Condensate 52°
Testing Method (pilot, back pr.) Back pr.	Tubing Pressure (Shut-in) 740#	Casing Pressure (Shut-in) 940#	Choke Size 1/2"

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

Signature **Ted A. Tipton** Area Manager
Printed Name **Ted A. Tipton** Title **(505)325-4397**
Date **2-19-93** Telephone No.

OIL CONSERVATION DIVISION

Date Approved **FEB 19 1993**
By **ORIGINAL SIGNED BY ERNIE BUSCH**
Title **DEPUTY OIL & GAS INSPECTOR, DIST. #3**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
 - 2) All sections of this form must be filled out for allowable on new and recompleted wells.
 - 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 - 4) Separate Form C-104 must be filed for each pool in multiply completed wells.
- NMOGCD (5)