HO. OF COPIES RECEIVED			
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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OiL		
	GAS		
CPERATOR			
PROBATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION

	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110		
	FILE U.S.G.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		Effective 1-1-65		
	LAND OFFICE	AUTHORIZATION TO TRA	APPORT OIL AND NATURAL G	AS .		
	IRANSPORTER OIL	1				
	CPERATOR	4				
	PHORATION OFFICE	1				
Texaco Inc., Operator for Texaco Producing Inc. (TPI)						
	PI)					
	Reason . for liling (Check proper box	31vd., Denver, CO 80	Other (Please explain)			
New wr Change in Transporter of: Change of Operator from Get						
	Recomplete a Change in Ownership	Cil Dry Ga Casinghead Gas Conder	for TDI	aco Inc. (Operator		
	If change of ownership give name and address of previous owner					
n.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No.					
	Lease Name Uti 1 1 i ama Day 1	3E Basin Dakota		Lease No.		
	Williams, Paul	JE Basin Dakoca		100		
	Unit Letter • A : 89	PO Feet From The North Lin	ne and 1010 Feet From 1	ehe East		
	Uine of Section 35 To	waship 26N Range	6W , NMFM, Ric	o Arriba 🤨 🛰 County		
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	And: ess (Give address to which approv	ed copy of this form is to be sent		
	Permian Corporati		P.O. Box 1528, Der			
	Name of Authorized Transporter of Ca.	singhead Gas or Dry Gas X;	Address (Give address to which approved copy of this form is to be sent)			
	El Paso Nat. Gas		P.O. Box 990, Farr			
	If well produces all or liquids, give location of tinks.	Unit Sec. Twp. Pge. A 35 26N 6W	Is just actually connected? Whe Yes	L2-7-81		
117		th that from any other lease or pool,	give commingling order number:			
17.	COMPLETION DATA	Oil Well Gas Well	New Weil Workever Deepen	Plug Back Same Restv. Diff. Restv.		
	Designate Type of Completion	i	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Perforutions			Depth Casing Shoe		
		TUBING, CASING, AND	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
			<u> </u>	·		
V.	TEST DATA AND REQUEST FOOL WELL	OR ALLOWABLE (Test must be a) able for this de	fter recovery of total valume of load oil o pth or be for full 24 hours)	ind must be equal to or exceed top allow-		
Date First New Ott Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)				t, etc.)		
		Tubing Pressure	Casing Press LD E G F	Chake SI		
	Length of Teet	i uping Pressure				
	Actual Prod. During Test	Cii-Bbis.	Water-Bbie. JAN 31 19	Gas-M&E/		
		OIL CON. DIV.				
	Actual Prod. Test-MCE/D	Length of Test	Bbis. Condensate/MMCF DIST. 3	•		
	Testing Method (pures, back pr.)	Tubing Preseure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
VI.	CERTIFICATE OF COMPLIAN	CE	1	TION COMMISSION		
	hereby certify that the rules and regulations of the Oil Conservation		APPROVED	JAN 31 1985,		
	Commission have been complied to	with and that the information given best of my knowledge and belief.	BY_ Srank	J Javy		
	AA I		TITLE SUPERVISOR DISTRICT # 3			
			This form is to be filed in compliance with RULE 1104.			
		atwe)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
	<u>District Manager/Farmington</u>		All sections of this form mu able on new and recompleted we	at be filled out completely for allow-		

1/28/85 (Date)

All sections of this form must be filled out completely for shows able 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.