| | | | | • | |
|---|--|--|--|---|--|
| | NO. OF COFIES RECEIVED | | | | |
| | DISTRIBUTION SANTA FE | | NSERVATION COMMISSION OR ALLOWABLE | Form C-104 Supersedes Old C-104 and C-11(| |
| | FILE | REQUEST F | AND | Effective 1-1-65 | |
| | U.S.G.S. | AUTHORIZATION TO TRAN | SPORT OIL AND NATURAL G | And E P P | |
| | LAND OFFICE | | | | |
| | TRANSPORTER OIL | | | Man VED | |
| | OPERATOR | | | Ou "AR 1 4 10 | |
| | PRORATION OFFICE | | ` | CO 1984 W | |
| 1. | Operator The The | | | OIL CON. DIV | |
| | TEXACO Inc., | | | 13/ 3 5/ | |
| | P. O. Box 2100, | P. O. Box 2100, Denver, Colorado 80201 | | | |
| Reason for filing (Check proper box) Other (Please explain) | | | | | |
| | New W. | Change in Transporter of: | | | |
| | Recompletion | Oil Dry Gas | | | |
| | Change in OPERATOR XX | Casinghead Gas Condens | sate | - | |
| | If change of ownership give name Do and address of previous owner | ome Petroleum Corp., | 1625 Broadway, Den | ver, Colorado | |
| 11. | II. DESCRIPTION OF WELL AND LEASE | | | | |
| | Lease Name Well No. Pool Name, Including Formation Kind of Lease | | | | |
| | Dome Davajo 3 5 1 WAW FRUITCHORD CUST State, Foderal or Fee Marajo 7479 | | | | |
| | Unit Letter I : 1520 Feet From The SOUTH Line and 1120 Feet From The ECIST Line of Section 13 Township 2100 Range 13W , NMFM, SOU JUXIO County | | | | |
| | | | | | |
| | | | | | |
| | II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | | | | |
| 111 | Name of Authorized Transporter of Cil | or Condensate | Address (Give address to which appro | ved copy of this form is to be sent) | |
| | 1 | | | | |
| | Name of Authorized Transporter of Cast | | Address (Give address to which appro | _ | |
| | EI PUSO MUTURA | Unit Sec. Twp. Ege. | P.O.BOX 990, Fabrical Will gas actually connected? | TOU VERMEXICO BITAOI | |
| | If well produces oil or liquias, give location of tanks. | I 13 alon 13w | 1 6 | F. U.S. | |
| | If this production is commingled with | | give commingling order number: | | |
| iV | If this production is commingled with COMPLETION DATA | | | Plug Back Same Resty, Diff. Resty. | |
| | Designate Type of Completion | Oil Wel. Gas Well | New Well Workover Deepen | Plug Back Same Hest. Dill. Hes v. | |
| | Date Spudged | Date Comp.: Ready to Prod. | Total Depth | P.B.T.D. | |
| | Date Spudges | Date Compil Head, to 1100 | | | |
| | Elevations (DF, RAb, RT, GK, etc. | Name of Freducing Formation | Top C11/Gas Pay | Tubing Depth | |
| | | | <u> </u> | Depth Casing Shoe | |
| | Feriorations | | | | |
| | | TUBING CASING AND | CEMENTING RECORD | | |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | |
| | | | 1 | | |
| | | 1 | 1 | | |
| | | | | | |
| V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL OIL Flow Company of Test (Test must be after recovery of total volume of load oil and must be equal to or excees able for this depth or be for full 24 hours) Producing feeting from pump, gas lift, etc.) | | | | l and must be equal to or exceed top allow- | |
| | | | | | |
| | Pate First New Oil Run To Tanks | Date of Test | blogging Methos Light, hereb, was | | |
| | Length of Test | Tubing Pressure | Cosing Pressure | Choke Size | |
| | | | | | |
| | Actual Prod. During Test | On-Bela. | Water-Bais. | Garrinof | |
| | | | | | |
| | GAS WELL | | Olsting | | |
| | As us. Pros. Test-MCF T | Length of Test | Bbis. Condensate/MMCF | Gravity of Condensate | |
| | | | | | |
| | Desiing weiksa (pitot, back pr.) | Tuning Pressure (Shut-in) | Cosing Pressure (Shut-in) | Choxe Size | |
| | | or. | OIL CONSERV | ATION COMMISSION | |
| + | 1. CERTIFICATE OF COMPLIAN | CE | OIL CONSERV | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| | t hereby certify that the rules and | regulations of the Oil Conservation | APPROVED | , 19 | |
| | Complete the compl | with and that the information given a best of my knowledge and belief. | | : Sittle | |
| | TEXACO Inc. as Opera | ator for Texaco Oils | Inc. | | |
| | IDIO:00 Tite: an oper | | WITCH THE TOTAL PROPERTY OF THE PROPERTY OF TH | OR DISTRICT # 3 | |
| | 0000 | | This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation. | | |
| | Shu R. Many | iature) | | | |
| | Field Supt. | ·-·-·· | well, this form must be accordance with RULE 111. tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow- | | |
| | (7 | itte | All sections of this form must be three out completed 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 | | |
| | 3-9-84 | | | | |
| | T (ii | sie ' | | | |
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