

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 <b>Texaco Exploration &amp; Production Inc.</b>		Well API No. <b>30-045-06876</b>
Address <b>3300 N. Butler, Farmington, New Mexico 87401</b>		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input 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 <b>Neah Victoria</b>	Well No. <b>2</b>	Pool Name, Including Formation <b>Blanco P.C. South (Gas)</b>	Kind of Lease <b>State, Federal or Fee</b>	Lease No. <b>864960</b>
Location Unit Letter <b>H</b> : <b>1450'</b> Feet From The <b>North</b> Line and <b>790'</b> Feet From The <b>East</b> Line Section <b>1</b> Township <b>27N</b> Range <b>9W</b> , NMPM, <b>San Juan</b> 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"/> <b>Meridian Oil, Inc.</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 4289, Farmington, NM 87499-4289</b>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <b>Texaco E. &amp; P. Inc.</b>	Address (Give address to which approved copy of this form is to be sent) <b>3300 N. Butler, Farmington, NM 87401</b>					
If well produces oil or liquids, give location of tanks.	Unit <b>H</b>	Sec. <b>1</b>	Twp. <b>27N</b>	Rge. <b>9W</b>	Is gas actually connected? <b>Yes</b>	When? <b>Unknown</b>

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
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		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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 be 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
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF


**JAN - 6 1992**  
**OIL CON. DIV.**  
**DIST. 3**

GAS WELL

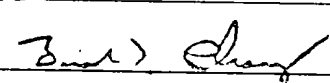
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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  
Date **1-06-93** Telephone No. **(505)325-4397**

OIL CONSERVATION DIVISION

Date Approved **JAN 6 1992**  
By   
Title **SUPERVISOR DISTRICT #3**

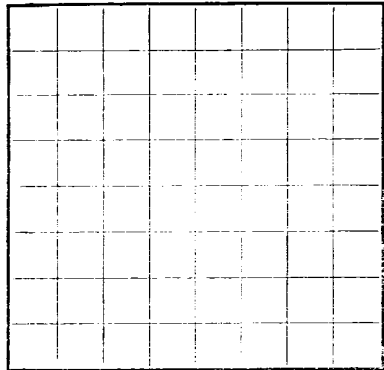
INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 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)

U. S. LAND OFFICE ~~Navajo~~ Allotted  
SERIAL NUMBER ~~I-149-Ind.~~ 8463  
LEASE OR PERMIT TO PROSPECT -----  
Neah-Victoria

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

LOG OF OIL OR GAS WELL



LOCATE WELL CORRECTLY

Company ~~Skelly Oil Company~~ Address ~~P.O. Box 426-Farmington, New Mexico~~  
Lessor or Tract ~~Neah-Victoria~~ Field ~~g. Blanco (P.C.)~~ State ~~New Mexico~~  
Well No. ~~2~~ Sec. ~~1~~ T ~~27N~~ R. ~~9W~~ Meridian ~~N.M.P.M.~~ County ~~San Juan~~  
Location ~~1450~~ ft. ~~(N)~~ of ~~Line~~ and ~~790~~ ft. ~~(W)~~ of ~~Line~~ of ~~Section 1~~ Elevation ~~5874'~~  
(Derrick floor relative to sea level)

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

Signed \_\_\_\_\_

Date ~~January 7, 1957~~ Title ~~District Foreman~~

The summary on this page is for the condition of the well at above date.

Commenced drilling ~~August 24,~~ 19 ~~56~~ Finished drilling ~~September 5,~~ 19 ~~56~~

OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from ~~3-201'~~ to ~~2110'~~ No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

IMPORTANT WATER SANDS

No. 1, from ~~none~~ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
8-5/8"	28#	8v	J-55	103'	Current Guide				
5-1/2"	14#	8r	J-55	2159'	Conn. Flange & Guide	2028'	2110'		Production

MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
8-5/8"	197'	15	circumferential		
5-1/2"	2171'	200	Halliburton		

PLUGS AND ADAPTERS

Heaving plug—Material \_\_\_\_\_ Length \_\_\_\_\_ Depth set \_\_\_\_\_

Adapters—Material \_\_\_\_\_ Size \_\_\_\_\_

SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Frased through perforations 7/1, c. P.H. 40,000#						
A.L.P. 1050# - Ave. treating pressure 1450# - Inf. Rate 67.4 B.P.M.						
Treating time 15 min.						

TOOLS USED

Rotary tools were used from \_\_\_\_\_ feet to ~~2185'~~ feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet

Cable tools were used from \_\_\_\_\_ feet to \_\_\_\_\_ feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet

DATES

\_\_\_\_\_, 19 ~~56~~ Put to producing \_\_\_\_\_, 19 \_\_\_\_\_

The production for the first 24 hours was \_\_\_\_\_ barrels of fluid of which \_\_\_\_\_% was oil; \_\_\_\_\_% emulsion; \_\_\_\_\_% water; and \_\_\_\_\_% sediment. Gravity, °Bé. \_\_\_\_\_

If gas well, cu. ft. per 24 hours ~~5,150~~ Gallons gasoline per 1,000 cu. ft. of gas \_\_\_\_\_

Rock pressure, lbs. per sq. in. ~~675# - 700#~~

FOLD | MARK

### HISTORY OF OIL OR GAS WELL

16-48094-2 U. S. GOVERNMENT PRINTING OFFICE

It is of the greatest importance to have a complete history of the well. Please state in detail the dates of redrilling, together with the reasons for the work and its results. If there were any changes made in the casing, state fully, and if any casing was "sidetracked" or left in the well, give its size and location. If the well has been dynamited, give date, size, position, and number of shots. If plugs or bridges were put in to test for water, state kind of material used, position, and results of pumping or bailing.