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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

I. Operator  
TEXACO INC.  
Address  
P. O. Box 2100, Denver, CO. 80201  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
This reports change of ownership from ~~Texaco Oils Inc.~~ to ~~Texaco Producing Inc.~~  
If change of ownership give name and address of previous owner: Texaco Oils Inc., P. O. Box 2100, Denver, CO. 80201

II. DESCRIPTION OF WELL AND LEASE

Lease Name Dome Fed 7-27-13	Well No. 2	Pool Name, including Formation WAW Fruitland P.C.	Kind of Lease State, Federal or Fee Federal	Lease No. NMI4973
Location Unit Letter <u>0</u> ; <u>820</u> Feet From The <u>South</u> Line and <u>1850</u> Feet From The <u>East</u> Line of Section <u>7</u> Township <u>27N</u> Range <u>13W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co.	P.O. Box 990, Farmington, NM 87401
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When Yes

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 Resrv.	Diff. Resrv.
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 Tanks	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

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission 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 PRODUCING INC.

SIGNED:

(Signature)

AREA SUPERINTENDENT

(Title)

6/19/87

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 26 1987, 19\_\_

BY [Signature]

TITLE SUPERVISION DISTRICT # 8

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.

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 completed wells.

RECEIVED  
JUN 26 1987  
OIL CON. DIV  
DEL 3

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Texaco Inc.	Well API No. 30-045-24047
Address 3300 N. Butler, Farmington, NM 87401	
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: <input checked="" type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> Change Pool Name From WAW Fruitland To Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> WAW Fruitland Sand - PC. <i>Pool Change Only</i>	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Dome Federal 7-27-13	Well No. 2	Pool Name, Including Formation WAW Fruitland Sand	Kind of Lease State, Federal or <del>Fee</del> <sup>FEED</sup>	Lease No. NM-14973
Location Unit Letter <u>O</u> : <u>820</u> Feet From The <u>South</u> Line and <u>1850</u> Feet From The <u>East</u> Line Section <u>7</u> Township <u>                    </u> Range <u>                    </u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co.	P.O. Box 990 Farmington, NM 87401
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When?
	NO

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 7-3-79	Date Compl. Ready to Prod. 8-2-79	Total Depth 1456'	P.B.T.D. 1415'					
Elevations (DF, RKB, RT, GR, etc.) 6006' GR	Name of Producing Formation Pietured Cliff	Top Oil/Gas Pay 1309'	Tubing Depth					
Perforations 1311' - 1314'	Depth Casing Shoe 1443'							
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 8 3/4"	CASING & TUBING SIZE 7"	DEPTH SET 41'	SACKS CEMENT 35 sxs (circulated)					
5"	2 7/8"	1443'	175 sxs (circulated)					

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 greater than allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS WELL

Actual Prod. Test - MCF/D 917	Length of Test 3 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) 210 psi	Choke Size 3/4"

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 Alan A. Kleier  
Printed Name Alan A. Kleier Area Manager  
Date 8/6/90 Title (505) 325-4397  
Telephone No.

OIL CONSERVATION DIVISION

AUG 08 1990

Date Approved                       
By                       
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.

District I  
PO Box 1980, Hobbs, NM 88241-1980  
District II  
PO Drawer DD, Artesia, NM 88211-0719  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals & Natural Resources Department

Form C-104  
Revised October 18, 1994  
Instruction on back  
Submit to Appropriate District Office  
5 Copies

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator name and Address Northstar Oil and Gas Corp. P.O. Box 93 Farmington, NM 87499		<sup>2</sup> OGRID Number 159020
		<sup>3</sup> Reason for Filing Code CH Effective Date: 4/1/99
<sup>4</sup> API Number 30-045-23581	<sup>5</sup> Pool Name WAW Fruitland Sand - Pictured Cliffs	<sup>6</sup> Pool Code 87190
<sup>7</sup> Property Code 24631	<sup>8</sup> Property Name Dome Federal 7-27-13	<sup>9</sup> Well Number 2

II. <sup>10</sup> Surface Location

UL or lot no. O	Section 7	Township T27N	Range R13W	Lot. Idn	Feet from the 820	North/South Line FSL	Feet from the 1850	East/West line FEL	County San Juan
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<sup>11</sup> Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
<sup>12</sup> Lse Code F	<sup>11</sup> Producing Method Code	<sup>14</sup> Gas Connection Date	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID 007057	<sup>19</sup> Transporter Name and Address El Paso Natural Gas P.O. Box 4990 Farmington, NM 87499	<sup>20</sup> POD 2501130	<sup>21</sup> O/G G	<sup>22</sup> POD ULSTR Location and Description

IV. Produced Water

<sup>23</sup> POD	<sup>24</sup> POD ULSTR Location and Description
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V. Well Completion Data

<sup>25</sup> Spud Date	<sup>26</sup> Ready Date	<sup>27</sup> TD	<sup>28</sup> PBDT	<sup>29</sup> Perforations	<sup>30</sup> DHC, DC, MC
<sup>31</sup> Hole Size	<sup>32</sup> Casing & Tubing Size	<sup>33</sup> Depth Set	<sup>34</sup> Sacks Cement		

VI. Well Test Data

<sup>35</sup> Date New Oil	<sup>36</sup> Gas Delivery	<sup>37</sup> Test Date	<sup>38</sup> Test Length	<sup>39</sup> Tbg. Pressure	<sup>40</sup> Csg. Pressure
<sup>41</sup> Choke Size	<sup>42</sup> Oil	<sup>43</sup> Water	<sup>44</sup> Gas	<sup>45</sup> AOF	<sup>46</sup> Test Method

"I" Thereby certify that the rules 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:

*John C. Corbett*

Printed Name:  
John C. Corbett

Title:

President

Date: 4/21/1999

Phone: (505) 327-5751

OIL CONSERVATION DIVISION

Approved By:

*37.8*  
SUPERVISOR DISTRICT #3

Title:

Approval Date:

MAY 17 1999

<sup>48</sup> If this is a change of operator fill in the OGRID number and name of the previous operator.

Pendragon Energy Partners

OGRID 145295

Previous Operator Signature

*Alan B. Nichol*

Printed Name

Alan B. Nichol

Title

President

Date

4/21/99