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

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

1000 kio Brazos kd., Aziec, NM 8/41	REQUES			BLE AND A						
Operator Texaco Exploration & Production I								PI No. 30-045-28152		
Address 3300 N. But	ler, Far	mingt	on, New	Mexico	87401	ļ.				
Reason(s) for Filing (Check proper box New Well Recompletion Change in Operator	Cha Oil Caninghead Ga	Dr	insporter of: y Gas	ei	er. Eh	r to be	DRILLED.			
If change of operator give name and address of previous operator	EXACO INC	. 330	O N. BU	TLER, F	ARMINGT	ON, NM	87401			
			ol Name, Includ BASIN	ing Formation PRUITLAN	D COAL		(Lease No. Fee Lease No.			
Location Unit LetterN	: 790	Fe	et From The	SOUTH Line	and18	320' Fe	et From The _	WEST	r Line	
Section 1 Town	ıship 27N	Ra	inge 9	W N	мрм,	87	AN JUAN		County	
III. DESIGNATION OF TRA	or o	Condensate		Address (Giv			copy of this for			
If well produces oil or liquids, give Accation of tanks.	Is gas actually	y connected?	When	7						
If this production is commingled with t	hat from any other le	ase or poo	I, give comming	gling order numl	ber:					
IV. COMPLETION DATA Designate Type of Completi		il Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resiv	Diff Res'v	
Date Spudded	Date Compl. R	eady to Pr	od.	Total Depth	<u> </u>	<u>.I</u>	P.B.T.D.		<u> </u>	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas	Top Oil/Gas Pay			Tubing Depth		
Perforations				1			Depth Casing Shoe			
HOLE SIZE		ING, C	·	CEMENTING RECORD DEPTH SET			SACKS CEMENT			
	EST FOR ALL er recovery of total v							or full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Test			Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pressur	Tubing Pressure			Casing Pressure			Cho Street F W		
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.			Water - Bbls.			AUG1 51991		
GAS WELL Actual Prod. Test - MCF/D	Length of Test			Bhie Conde	Male/MACE		O	LCON	, DIY	
William Lion Lest - MICLID					Bbls. Condensate/MMCF			Gravity of Condengue.		
l'esting Method (pitot, back pr.)	Tubing Pressur	Tubing Pressure (Shut-in)			Casing Pressure (Shul-in)			Choke Size		
VI. OPERATOR CERTIFICATE OF COMPLIANCE 1 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.					OIL CONSERVATION DIVISION Date Approved AUG 1 5 1991					
Signature Ted A. Tipton Area Manager				By SUPERVISOR DISTRICT 13						
Printed Name 8-12-91		5)325	ide -4397	Title					73	
Date		Teleph	one No.	11						

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.