

Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Texaco E & P Inc.		Well API No. 30-045-23978
Address 3300 N. Butler, Farmington, New Mexico 87401		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Other (Please explain) Recompletion <input checked="" 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 Wayne Moore Com	Well No. 1-A	Pool Name, Including Formation Blanco - Pictured Cliffs	Kind of Lease State, Federal or Fee	Lease No. E-5167
Location East Unit Letter P 790 Feet From The South Line and 790 Feet From The EAST Line Section 16 Township 31N Range 9W, NMPL San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Meridian Oil	or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 3535 E. 30th Ave., Farmington NM 87401				
Name of Authorized Transporter of Casinghead Gas Texaco E & P Inc.	or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 3300 N Butler Ave., Farmington NM 87401				
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 16	Twp. 31	Rge. 9W	Is gas actually connected? Yes	When? 4/23/91
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
		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>
Date Spudded 2-7-80	Date Compl. Ready to Prod. 5-2-91		Total Depth 5896' 5903'		P.B.T.D. 5853' 5755'			
Elevations (DF, RKB, RT, GR, etc.) 5319' KB	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 3174'		Tubing Depth 3268'			
Perforations 3174'-3198', 3201', 3204', 3208'-3266', 3273', 3277', 3298'-3300'			Depth Casing Shoe 5108'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 11"	CASING & TUBING SIZE 8 5/8"		DEPTH SET 305'		SACKS CEMENT 130 SX			
7 7/8"	5 1/2"		5108'		845 225 SX			
4 3/4"	3 1/2"		5901'		93 SX			
		2 1/2"	3268'					

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	Gas Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
		JUN 6 1991	
		OIL CON. DIV	
		DIST. 3	

GAS WELL

Actual Prod. Test - MCF/D 1506	Length of Test 3 Hrs.	Bbls. Condensate/MMCF 12	Gravity of Condensate 47.6 @ 75
Testing Method (pilot, back pr.) back pr.	Tubing Pressure (Shut-in) 101#	Casing Pressure (Shut-in) 320#	Choke Size .750"

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  
Printed Name  
6-6-91  
Date  
Area Manager  
(505) 325-4397  
Title  
Telephone No.

OIL CONSERVATION DIVISION

JUN 6 1991

Date Approved  
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.