

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE		/
FILE		/-
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	
OPERATOR		2
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

RECEIVED

I. Operator		JUL 13 1966
Tenneco Oil Company		O. C. C.
Address		ARTESIA, OFFICE
Box 1031, Midland, Texas		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion	<input type="checkbox"/>	Oil <input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>
		Dry Gas <input type="checkbox"/>
		Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, Including Formation	Kind of Lease
State M	B-9563	2	Grayburg Jackson SA	B-9563
Location				
Unit Letter	A	660	Feet From The North	Line and 660
				Feet From The East
Line of Section	21	Township	17-S	Range 29-E
				NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input checked="" type="checkbox"/>	or Condensate	<input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
The Permian Corporation				Box 3119, Midland, Texas
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/>	or Dry Gas	<input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
	B	21	17-S	29-E
				Is gas actually connected?
				No
				When

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'tv.	Diff. Res'tv.
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
5/22/66			2846			2790		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
3571 RKB	San Andres		2610			2732		
Perforations	One - 1/2" hole @ 2610, 2616, 2632, 2637, 2651, 2660, 2670, 2681, 2698, 2702					Depth Casing Shoe		
2840								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
11"	8-5/8		359			195 sx		
6-3/4"	4-1/2		2840			110 sx		
4-1/2" Cag.	2-3/8		2732			Tubing		

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.)	
7/10/66	7/10/66	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	20	20	Open 2"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
56 Bbls.	40	16 (load)	TSTM

GAS WELL

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

J. F. Carnes  
(Signature)  
District Production Engineer  
(Title)  
July 12, 1966  
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 13 1966, 19  
BY P. L. Eames  
TITLE OIL AND GAS INSPECTOR

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.



copy to 1.

RECEIVED

STATE M NO. 2  
A 21 17-S 29-E  
Eddy County, New Mexico

U. S. G. S.  
ARTESIA, N. M.

DEVIATION SURVEYS

<u>Depth</u>	<u>Degrees of Deviation</u>	<u>Depth</u>	<u>Degrees of Deviation</u>
800	3/4	2,142	3/4
1,196	3/4	2,425	3/4
1,680	3/4		

AFFIDAVIT

State of Texas

County of Midland

Before me on this day personally appeared A. R. Gibson, known to me to be the person whose name is subscribed to this instrument, who after being duly sworn on Oath states that he represents Tenneco Oil Company in the capacity of District Drilling Engineer and that said report of Deviation Surveys contains no misstatements or inaccuracies and that no pertinent matter has been omitted, and that affiant is duly authorized to make this affidavit.

A. R. Gibson  
A. R. GIBSON

Sworn to and subscribed before me this 12<sup>th</sup> day of July, 1966.

Carole A. Windsor Notary Public in and for Midland County, Texas.

My Commission Expires 6-1-67.

CAROLE A. WINDSOR - 208 West Parker  
Notary Public in and for Midland County, Texas