

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

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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	1
OPERATOR		
PRORATION OFFICE		

TRANSPORTER CHANGED FROM SHELL  
OIL COMPANY TO SHELL PIPE LINE  
CORPORATION EFFECTIVE 12/31/69

Operator Tenneco Oil Company	
Address Suite 1200 Lincoln Tower Building, Denver, Colorado 80203	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>
	Dry Gas <input checked="" type="checkbox"/>
	Condensate <input type="checkbox"/>
Other (Please explain) Baker Model D Packer @ 2490' LOK-Set Packer @ 1642'.	

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hospah A	Well No. 23	Pool Name, including Formation Dakota	Kind of Lease State, Federal or Fee Fed	Lease No. NM 8270
Location				
Unit Letter K ; 1650 Feet From The South Line and 1800 Feet From The West				
Line of Section 12 Township 17N Range 9W , NMPM, McKinley 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)	
Tenneco Oil Company	Lincoln Tower Bldg. Denver, Colorado 80203	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? When	
	No stand by for Lse. Use	

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 Re entry 7-15-69	Date Compl. Ready to Prod. 7-22-69	Total Depth 2968	P.B.T.D. 2942					
Elevations (DF, RKB, RT, GR, etc.) 7088 GR	Name of Producing Formation Dakota	Top Oil/Gas Pay 2590	Tubing Depth 2490					
Perforations 2590-2865	Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
10-3/4"	8-5/8" 20#	91	70
6-3/4"	4-1/2" 11.6#	2942	245
	2-3/8" TBG	2490	

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 2904	Length of Test 3 hrs.	Bbls. Condensate/MMCF none	Gravity of Condensate None
Testing Method (pitot, back pr.) Critical Flow Prover	Tubing Pressure (Shut-in) 867	Casing Pressure (Shut-in) 867	Choke Size 3/4"

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.

	
(Signature)	
Sr. Production Clerk	
(Title)	
9-5-69	
(Date)	

OIL CONSERVATION COMMISSION

OCT 10 1969

APPROVED	19
Original Signed by Emery C. Arnold	
BY	SUPERVISOR DIST. #3
TITLE	

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.

