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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-61

30-031-20171

5a. Indicate Type of Lease	State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.		

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator TENNECO OIL COMPANY	8. Farm or Lease Name SFP - RR
3. Address of Operator Suite 1200 Lincoln Tower Building, Denver, Colorado 80203	9. Well No. 3
4. Location of Well UNIT LETTER <u>B</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>2538</u> FEET FROM THE <u>East</u> LINE, SECTION <u>24</u> TOWNSHIP <u>17N</u> RANGE <u>9W</u> NMPM.	10. Field and Pool, or Wildcat Undesignated Dakota
15. Elevation (Show whether DF, RT, GR, etc.) 7052 GR	12. County McKinley

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

PLUG AND ABANDON	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>	PLUG AND ABANDONMENT	<input type="checkbox"/>
CASING TEST AND CEMENT JOB	<input type="checkbox"/>	OTHER	<input checked="" type="checkbox"/> Perforate and acidize

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Moved in completion unit 10-3-70, cleaned out to PBTD of 2854', perforated 2830 - 34' w/2 shots per ft. Acidized w/2500 gals 15% HCL, swabbed. Squeezed perforations 2830 - 34' w/70 sacks, cleaned out to PBTD of 2820', perforated 2813 - 15' w/4 jts per ft., acidized w/1000 gals 15% HCL, swabbed. Ran 89 jts of 2-3/8" tubing landed at 2767. Installed pumping unit, rods and 1-1/2" pump. Well tested 24 hrs. on 10-18-70, 107 Bbls oil, 60 Bbls water, 72 MCF, FOR 675, 54° gravity.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [Signature] TITLE Sr. Production Clerk DATE 10-20-70

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

DATE OCT 22 1970

CONDITIONS OF APPROVAL, IF ANY:



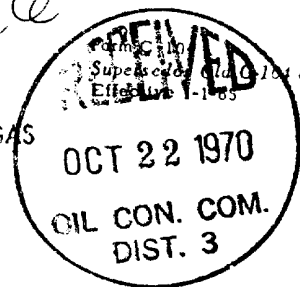
LTR



Job separation sheet

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



I. Operator
TENNECO OIL COMPANY
Address
Suite 1200 Lincoln Tower Building, Denver, Colorado 80203
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)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name SFP - RR	Well No. 3	Pool Name, including Formation Undesignated Dakota	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter B ; 660 Feet From The North Line and 2358 Feet From The East Line of Section 24 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) 200 B Petroleum Plaza, Farmington, N. M.			
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 J	Sec. 13	Twp. 17	Rge. 9
	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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9-21-70	Date Compl. Ready to Prod. 10-15-70	Total Depth 2893	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 7052 GR	Name of Producing Formation Undesignated Dakota	Top Oil/Gas Pay 2635	Tubing Depth 2767					
Perforations 2813 - 15 w/4 jts per ft.			Depth Casing Shoe 2893					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4	8-5/8	60	50 sacks circulated					
7-7/8	5-1/2	2893	300 sacks					

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 10-15-70	Date of Test 10-18-70	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size None
Actual Prod. During Test 107	Oil - Bbls. 107	Water - Bbls. 60	Gas - MCF 72

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.

Sr. Production Clerk

10-20-70

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 22 1970

BY Original Signed by Emery C. Arnold

TITLE SUPERVISOR DIST. #3

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.