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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION 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-
Effective 1-1-65

B.K.

I. Operator
Tenneco Oil Company
Address
P.O. Box 3249, Englewood, Colorado 80155
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 Hospah	Well No. 66	Pool Name, Including Formation Lower Hospah	Kind of Lease State, Federal or Fee	State State	Lease No. 081208
Location Unit Letter G : 1646 Feet From The North Line and 2667' Feet From The East 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 checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Production Company <i>Pipeline Corp.</i>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1588, Farmington, New Mexico 87401				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> N/A	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 G	Sec. 12	Twp. 17N	Rge. 9W	Is gas actually connected? When

If this production is commingled with that from any other lease or pool, give commingling order number:

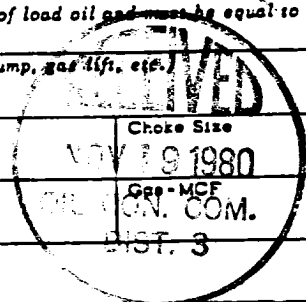
IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Date Spudded 8/28/80	Date Compl. Ready to Prod. 10/6/80		Total Depth 1715'		P.B.T.D. 1663'			
Elevations (DF, RKB, RT, GR, etc.) 6995' gr.	Name of Producing Formation Lower Hospah		Top Oil/Gas Pay 1624'		Tubing Depth 1636'			
Perforations 1624-1636'					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8" 54.5#		160'		175 sx			
11"	8-5/8" 24#		1715'		150 sx			

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 10-6-80	Date of Test 10/12/80	Producing Method (Flow, pump, gas lift, etc.) Pump
Length of Test 24 hrs.	Tubing Pressure 0	Casing Pressure 0
Actual Prod. During Test 15 B/O	Oil - Bbls. 15	Water - Bbls. 687



GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (puot, 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.

Charles R. Patterson
(Signature)
Assistant Division Administrative Manager
(Title)
November 4, 1980
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 21 1980, 19
BY Original Signed by CHARLES GHOLSON
TITLE DEPUTY OIL & GAS INSPECTOR, 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 deepen well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells 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 conditions.
Separate Forms C-104 must be filed for each pool in multiple completed wells.