NO. OF COPIES RECEIVED		5	-
DISTRIBUTION			
SANTA FE	/		
FILE		1	ست
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	1	
OPERATOR		2	
PRORATION OFFICE			
Commenter		• • • •	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

SANTA FE		REQUEST	FOR ALLOWABLE	Supersedes Old C-10	4 and C-11
FILE		AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
U.S.G.S.	AUTHOR	IZATION TO TRA	ansport oil and natur	AL GAS	
011					
TRANSPORTER	; /				
OPERATOR	2				
I. PRORATION OFFICE					
Operator	043 <i>Annua</i>				
Address	ce 011 Cempany				
P. 0.	Bex 1714; Burange	. Colorado			
Reason(s) for filing (Check		ourarada	Other (Please explain)	
New Well	Change in T	ransporter of:			
Recompletion	Oil	Dry Go	ıs		
Change in Ownership	Casinghead	Gas Conde	nsate	· · · · · · · · · · · · · · · · · · ·	
If change of ownership g	ive name				
and address of previous					
II. DESCRIPTION OF WE	TI AND LEASE				
Lease Name	LE MAD BEASE	Well No. Pool Na	me, Including Formation	Kind of Lease	
Jicarilla "F) PR	2 Basi	n Daketa	State, Federal or Fee Fed	leral
Location			_		-
Unit Letter M	; 845 Feet From '	The West Lir	ne and 815 Feet	From The South	
1 5 36	, Township 26N	D	THE ATMENT	704 m. A43. m.	a .
Line o: Section 16	, Township	Range	, NMPM,	Rio Arriba	County
II. DESIGNATION OF TR	ANSPORTER OF OIL A	ND NATURAL GA	ıs		
Name of Authorized Trans		iensate		approved copy of this form is to be s	ent)
None			4000		·
Name of Authorized Trans	porter of Casinghead Gas	or Dry Gas 🚂	Address (Give address to which	approved copy of this form is to be s	ent)
Southern Union		- T	Pidelity Union Toyo Is gas actually connected?	r; Dallas, Texas	
If well produces oil or liquidive location of tanks.	oids, Unit Sec.	Twp. Rge.		i i	
			No.	Apprex. 5-24-65	
If this production is come V. COMPLETION DATA	ningled with that from any	other lease or pool,	give commingling order number		
		Well Gas Well	New Well Workover Deep	en Plug Back Same Res'v. D	iff. Res'v.
Designate Type of	Completion – (A)	<u> </u>	1 x		
Date Spudded	Date Compl. Rea	dy to Prod.	Total Depth	P.B.T.D.	
12-4-64	1-5-65		7600'	74941	
Pool	Name of Produci	-	Top M/Gas Pay	Tubing Depth	
Basin Dakota Perforations Tools Of	Dekots	26 27 20 he l	7200-7450	7424* Depth Casing Shoe	
7411,13,	72,91,93, 7380,30,	30,5(,39,40,4	1,43,44,75,77,81,83,	76001	
Table Tabl		BING, CASING, ANI	D CEMENTING RECORD		
HOLE SIZE		TUBING SIZE	DEPTH SET	SACKS CEMENT	
12 ["	8-5/8"		435	225 ex	
7-7/8"	A A		7600	lst stage 160 sx	
	2-3/8"		7424	2nd stage 780 sx	·
V TEST DATA AND DE	OUEST FOR ALLOWARI	(F (Test must be s	fter recovery of total values of lo	ad oil and must be sound to as sussed	
V. TEST DATA AND RECOIL WELL	QUESI FUR ALLOWADI	able for this de	epth or be for full 24 hours)	nd oil and must be equal to or exceed	top allow-
Date First New Oil Run To	Tanks Date of Test		Producing Method (Flow, pump,	gas lift, etc.)	
				OFITIAL	1
Length of Test	Tubing Pressure		Casing Pressure	Chekeryla	1
Actual Prod. During Test	Oil-Bbls.		Water - Bbls.	Gos-MOM AV 11 1965	
Actual Floa, During Test	OH - Bais.		Trace Bails.	Gos-MONIA CON. COI	۸./
				DIST. 3	
GAS WELL				, Die.	•
Actual Prod. Test-MCF/E	Length of Test		Bbls. Condensate/MMCF	Gravity of Condensate	
2510	3 hrs		0		
Testing Method (pitot, bac	k pr.) Tubing Pressure	-	Casing Pressure	Choke Size	
AOF	197		605	3/4"	
VI. CERTIFICATE OF CO	OMPLIANCE		OIL CONSE	RVATION COMMISSION	
			APPROVED MAY 12	1965	
	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.				
			Original Signed Emery C. Arnold Supervisor Dist. # 3		
· · · · · · · · · · · · · · · · · · ·			TITLE Supervisor D	ist. # 3	
Original S	Original Signed no.		This form is to be filed in compliance with RULE 1104.		
J. H. W.	Original Signed By: J. H. WATKINS			d in compliance with RULE 1104 allowable for a newly drilled or	
	(Signature)		well, this form must be acc	ompanied by a tabulation of the	deviation
District Off	ice Supervisor		1	accordance with RULE 111. m must be filled out completely f	for allow
	(Title)		able on new and recomplet		.u. allow-
May 6,			Fill out Sections I, I	I, III, and VI only for changes of	of owner,
	(Date)		well name or number, or train	isporter, or other such change of o	.onuition.

Fill out Sections I, II, III, and VI only 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.

TABULATION OF DEVIATION TESTS

TENNECO GIL COMPANY

JICARILLA B-2

DEPTH	INCLINATION	
869'	1-1/20	
1368'	1-1/20	
18 62'	1-1/20	
2120'	ဥဝ	
2 78 5 '	₂ 0	
32 8 9'	2-1/40	
36431	ුර	
4076	1-3/h	
4448.	1-3/40	
4690°	1-3/40 3/40	
4861'	3/40	
5170'	3/40	
53851	10	
5746'	3/40	
62481	1-3/40	
653 1'	3/40	
6719'	1-1/20	
74291	2-1/40	
7600'	2-1/40	

AFFIDAYIT

THIS IS TO CERTIFY that to the best of my knowledge the above tabulation details the deviation test taken on TENNECO OIL COMPANY'S Jicarilla B-2, Gallup-Dakota Field, located in Section 16, T-26-N, R-5-W, Rio Arriba County, New Mexico.

Signed District Production Engineer

THE STATE OF COLORADO)

COUNTY OF LA PLATA

BEFORE ME, the undersigned authority, on this day personally appeared

J. D. Hicks known to me to be District Production Engineer for TennecoMAY 11 1965

Oil Company and to be the person whose name is subscribed to the above CON. COM statement, who, being by me duly sworn on oath, states that he has knowledge of the facts stated herein and that said statement is true and correct.

SUBSCRIBED AND SHORM TO before me, a Motary Public in end for said County and State this 29th day of December, 1964.

They aren Pleaguere