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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-116  
Effective 1-1-65

I. Operator  
Tenneco Oil Company

Address  
720 So. Colorado Blvd., Denver, Colorado 80222

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:		Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	BASIN DAKOTA
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	BLANCO MESAVERDE
		Dry Gas	<input type="checkbox"/>	COMMINGLING ORDER R-5707
		Condensate	<input type="checkbox"/>	

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

\*JICARILLA CONT. 108

Lease Name JICARILLA C	Well No. 8	State, Federal or Fee FEDERAL	Lease No. *
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Location  
Unit Letter E : 1850 Feet From The N Line and 1450 Feet From The W

Line of Section 1813 Township 26N Range 5W , NMPM, RIO ARRIBA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
PLATEAU INC.	1921 BLOOMFIELD BLVD., FARMINGTON, NM 87401
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)
NORTHWEST PIPELINE INC.	P.O. BOX 1526, SALT LAKE CITY, UTAH 84110

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.	Is gas actually connected?	When
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If this production is commingled with that from any other lease or pool, give commingling order number: NO. 5707

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
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Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE (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. (20%) m	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
521 (80%) Lbs.	24 HRS.		
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
BACK. PR.	260	600	

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.

Carley Statten  
(Signature)  
Administrative Supervisor  
(Title)  
6/19/78  
(Date)

OIL CONSERVATION COMMISSION  
JUN 12 1978  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by A. R. Kendrick  
SUPERVISOR DIST. #  
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 multiple completed wells.