## El Paso Natural Gas Company

El Paso, Texas 79999

July 24, 1967

ADDRESS REPLY TO POST OFFICE BOX 990 FARMINGTON. NEW MEXICO B740

Tenneco 011 Company P. O. Box 1714 Durango, Colerado

## Gentlemen:

Your well, Jicarilla A #8, located NE 17-26-5 has been tied-in and FPC approval received for casinghead production as of July 21, 1967.

Due to necessary forms not being filed with the New Mexico Oil Conservation Commission in Aztec, we do not have the authority to produce this well.

Please advise.

Very truly yours,

El Paso Natural Gas Company

Original Signed By W. M. Rodgers

W. M. Rodgers Chief Dispatcher

## WMR/mmm

cc: D. V. Rittmann

Oil Commission - Aztec

File



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	GAS		<u> </u>
OPERATOR		1	
PRORATION OFFICE			
0			

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

i.	U.S.G.S.  LAND OFFICE  IRANSPORTER  OIL  GAS  OPERATOR  PRORATION OFFICE  Operator	AUTHORIZATION TO TRAI	AND NSPORT OIL AND NATURAL	GAS (				
	Tenneco Oil Company							
	P. O. Box 1714, Durango, Colorado 81301							
	eason(s) for filing (Check proper box)  ew We!l							
	If change of ownership give name Note: Packer w/push out plug set at 6852' above Dakota zone.							
II.	II. DESCRIPTION OF WELL AND LEASE  Lease Name  Lease No.   Well No.   Pool Name, Including Formation   Kind of Lease							
	Lease Name <b>Jicarilla</b>	_ ,	Blanco Tocito Gallup	State, Federal or Fee Federal				
	Location H 2365	North	790 Feet From	East				
	Unit Letter; Line of Section 17	Feet From The Line		Arriba County				
			9					
III.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GAS  or Condensate	Address (Give address to which appro	1				
	Rock Island Oil a		P. O. Box 328, Farming Address (Give address to which appro	gton, New Mexico				
1	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Give address to which appro	over copy of this form is to be semi				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. H 17 26N 5W	l No	When Dakota zone 1s completed.				
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:					
	Designate Type of Completion - (X)  Oil Well Gas Well New Well Workover  X  Oil Well Gas Well New Well Workover  X							
	Date Spudded	Date Compl. Ready to Prod. 9/29/66	Total Depth 7658	P.Bar.D. 7610				
	8/21/66 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
- 4	6604 GR Perforations	Gallup 6814 OIL CON. COM. 7658  DIST. 3 Depth Casing Shoe						
	6814-18 Gallup  TUBING, CASING, AND CEMENTING RECORD							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
į	12-1/4	8-5/8 4-1/2	410 7657	200 sx 710 sx				
,	7-7/8	4-1/2	7037	1.10.58				
v.	TEST DATA AND REQUEST FO	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 allow-						
	OIL WELL Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours)  Producing Method (Flow, pump, gas lift, etc.)					
1	10/18/66	10/18/66	Flowing	Choke Size				
	Length of Test	Tubing Pressure	Casing Pressure	2" open				
	24 hours Actual Prod. During Test	Oil-Bbls.	Water-Bble.	Gan-MCF				
	97 bbls.	97 bbls.	0	464 GOR - 477				
	Note: Well completed in Dakota but BP set above this zone blanking it off for present.							
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate				
į.	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size				
VI.	CERTIFICATE OF COMPLIANO							
	I hereby certify that the rules and i	regulations of the Oil Conservation with and that the information given	BY Original Signed by Emery C. Arnold  TITLE SUPERVISOR DIST, #8					
	above is true and complete to the	best of my knowledge and belief.						
	'		11	11 · 5				
	Hawlk	C Thekola	This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepened					
	Harold C. Nicho		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
	Senior Producti	on Clerk	All sections of this form must be filled out completely for allowable on new and recompleted wells.					
	December 7, 196	6	must true and to Constant T	II. III, and VI for changes of owner, orten or other such change of condition.				
	(Do	Separate Forms C-104 must be filed for each pool in multip						
			completed wells.					