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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION 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 1-1-83

Operator TENNECO OIL COMPANY	
Address BOX 3249, ENGLEWOOD, CO 80155	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☒

If change of ownership give name and address of previous owner _____

I. DESCRIPTION OF WELL AND LEASE				
Lease Name Hanson	Well No. 2	Pool Name, including Formation Basin Dakota	Kind of Lease State (Federal) or Fee SF-080373	Lease No.
Location				
Unit Letter L	1450	Feet From The south	Line and 800	Feet From The west
Line of Section 6	Township 25N	Range 10W	N.M.P.M. San Juan	County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
GIANT REFINING CO.	BOX 256, FARMINGTON, NM 87401
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
Gas Company of New Mexico Northwest Pipeline Corp.	Box 1899 Bloomfield, NM 87413 Box 90 Farmington, NM 87401
If well produces oil or liquids, give location of tanks.	Unit: L Sec: 6 Twp: 25N Rng: 10W
	Is gas actually connected? YES

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

III. COMPLETION DATA			
Designate Type of Completion - (X)	Oil well ☐ Gas well ☐ New well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Depth ☐ Diff. Res. ☐		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.S.T.D.
Elevations (DF, RKE, RT, CR, 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 OIL WELL		(Test must be after recovery of total volume of load oil and must be equal to or exceed sap 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
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS WELL		
Actual Prod. Test - MCF/D	Length of Test	Slip. Condensate/MUCF
Testing Method (pistol, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)

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.	
<u>Denise Wilson</u> (Signature) PRODUCTION ANALYST AUGUST 1, 1982 (Date)	
OIL CONSERVATION COMMISSION APPROVED <u>AUG 16 1982</u> Original Signed by FRANK T. CHAVEZ BY _____ SUPERVISOR DISTRICT # 3 TITLE _____ 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 deviator 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 multi-pool formations.	