| 1 | | 1 | | | |
|-----|--|--|---|----------------------------------|--|
| | PISTRIBUTION | NEW MEXICO OIL CO | INSERVATION COMMISSION | Form C -104 | |
| | SANTA FE | REQUEST F | FOR ALLOWABLE | Supersedes Old C-104 and C- | |
| - 1 | FILE | | AND | Effective 1-1-55 | |
| | U.S.G.S. | AUTHORIZATION TO TRA | NSPORT OIL AND NATURAL G | AS | |
| | LAND OFFICE | | | | |
| | TRANSPORTER OIL GAS | | | | |
| | OPERATOR | 1 | | | |
| | PRORATION OFFICE | | | | |
| • | Operator Tenneco Oil Company | | | | |
| | Address Box 3249, Englewood, Co 80155 | | | | |
| | Reason(s) for filing (Check proper box) Other (Please explain) | | | | |
| | New Meil | Oil Dry Gai | | | |
| | Recompletion Change in Ownership | Casinghead Gas Conden | <u> </u> | | |
| • | If change of ownership give name | | | | |
| | and address of previous owner | | | | |
| n. | DESCRIPTION OF WELL AND | LEASE. Well No.; Pool Name, Including Fo | ermation Kind of Lease | Federal Lease Na | |
| | Schwerdtfeger A | 5E Basin Dakota | State, Federa | | |
| | Unit Letter A : 850 Feet From The North Line and 1060 Feet From The East | | | | |
| | | | | | |
| | Line of Section 6 Township 27N Range 8W , NMPM, San Juan County | | | | |
| m | DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | | | | |
| | Name of Authorized Transporter of Oil or Condensate A A2 Conoco | | Box 460 Hobbs, New Mexico 88240 | | |
| | NETTO BY Additional Property of Control of C | | Nadress (Give address to which approved copy of this form is to be sent) Box 1526 Salt Lake City, Utah 84111 | | |
| | that Sec. Twp. Rge. Is gas actually connected? When | | | | |
| | If well produces oil or liquids, give location of tanks. | A 6 27N 8W NO ASAP | | | |
| | If this production is commingled with that from any other lease or pool, give commingling order number: | | | | |
| 14. | Designate Type of Completic | on - (X) Gas Well X | New Well Workover Deepen | Piug Back Same Resty. Diff. Rest | |
| | Date Spudded 2/21/81 | Date Compl. Ready to Prod. 4/9/81 | Total Depth 7192 | P.B.T.D. 7175' | |
| | Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Tep Oil/Gas Pay | Tubing Depth | |
| | 6456' gr | Dakota | 7042 | 7050' | |
| | 7042-58',7104-10', 7120-22', 7142-47'. | | | | |
| | | | CEMENTING RECORD | T | |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | |
| | 124" | 9-5/8" 36# | 267' | 250sx | |
| | 8-3/4" | 7" 23# | 3194' | 250sx | |
| | 61/4" | 4½" 10.5# 11.6# 2-3/8" | 7191' | 550sx | |
| 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 alicable for this depth or be for full 24 hours) | | | | |
| | OIL WELL Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas li | fi, etc.j | |
| | Length of Test | Tubing Pressure | Casing Pressure | Chore Size | |
| | Feudin at 1 ser | | | | |
| | Actual Prod. During Test | OII-Bble. | Water-Bbls. | Che-MCF | |
| | AFR 1 7 1981 | | | | |
| | GAS WELL | It could be Tool | <u> </u> | Graylty of Condensate | |
| | Actual Prod. Test-MCF/D | Length of Test | Esta Course Agilla COM (SC) | ₩ - / | |
| | 553 | Tubing Pressure (Shut-in) | Cosing Pressure (Shut-12) | Choke Size | |
| | Testing Method (putot, back pr.) | | 1350PST | 3/4" | |
| | Back Pressure | 1340PSI | | ATION COMMISSION | |
| VI. | CERTIFICATE OF COMPLIAN | ERTIFICATE OF COMPLIANCE | | APR 9 9 1001 | |
| | | envisions of the Oil Conservation | APPROVED HER & S 1981 19 | | |

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.

| Chilly Hattern | | | | |
|----------------------|--|--|--|--|
| Asst. Div. Adm. Mgr. | | | | |
| (Title) | | | | |

April 13, 1981

(Dete)

__, 19 _ Original Signed by FRANK T. CHAVEZ 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 deviation taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allo able on new and recompleted wells.

Fitt out only Sections I. II. III. and VI for changes of owns well name or number, or transporter, or other such change of conditions.

Separate Forms C-104 must be filed for each pool in multip