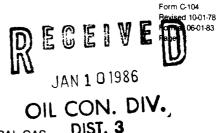
STATE OF NEW MEXICO **ENERGY AND MINERALS DEPARTMENT**

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OIL CONSERVATION DIVISION P.O. BOX 2088

SANTA FE, NEW MEXICO 87501



REQUEST FOR ALLOWABLE AND

PROPATION OFFICE AUTHORIZATION TO TRANSP	ORT OIL AND NATURAL GAS DIST. 3
l	
Operator O 3 Common of the Com	
Tenneco Oil Company	
P. O. Box 3249, Englewood, CO 80155	
Reason(s) for filing (Check proper box)	Other (Please explain)
IV)	,,, , , , , , , , , , , , , ,
X 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	
II. DESCRIPTION OF WELL AND LEASE	
Lease Name Well No. Pool Name, Including Format	
Schwerdtfeger A LS 20M Blanco Mes	averde State, Federal or Fee SF 079319
Location	P 1
Unit Letter J: 2020 Feet From The S	outh Line and 1520' Feet From The East
o 27N	Range 8W NMPM San Juan County
Line of Section O Township 2717	nailye , million
III. 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)
Conoco Inc. Surface Transportation	P. O. Box 460, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas _ or Dry Gas 🏋	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas	P. O. Box 4990, Farmington, NM 87499
Unit Sec. Twp. Rge.	Is gas actually connected? When
If well produces oil or liquids. give location of tanks. J 8 27N 8W	No ASAP
If this production is commingled with that from any other lease or pool, give commingling order number	
NOTE: Complete Parts IV and V on reverse side if necessary.	
NOTE: Complete Parts IV and V on reverse side in necessary.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION 1986
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied	APPROVED JAN 21 JOU
with and that the information given is true and complete to the best of my knowledge and belief.	Attacks II rown 7 curves
Λ	BY Original Signed by FRANK T. CHAVEZ
// -	TITLE SUPERVISOR DISTRICT 報 3
Short Mikning	This form is to be filed in compliance with RULE 1104.
(Signature)	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.
Senior Regulatory Analyst	All sections of this form must be filled out completely for allowable on new and recompleted walls
1/1/86	Fill out only Section I, II, III, and VI for changes of owner, well name and or number, or transporter or other such change of condition.
(Date)	Separate Forms C-104 must be filed for each pool in multiply completed wells.

ьяде 2 Format 06-01-83 Revised 10-01-78 Form C-104

IV. COMPLETION DATA

Producing Method (Flow, pump, gas lift, etc.)	Date of Test	Date First New Oil Run To Tanks
i 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 S4 hours)	S ALLOWABLE OIL WELL	V. TEST DATA AND REQUEST FOR
8333, KB	2 3/8" tbg	
2417-7450' KB 250 5x, 394 CF	4 1/2" csg liner	"t/I 9
2210, KB 637 sx, 1073 CF	∆" csg	8 3/4"
314, KB 520 8x3 595 CF	6 2/8 csd	12 1/4"
DEPTH SET SACKS CEMENT	CASING & TUBING SIZE	HOFE SIZE
СЕМЕИТІИВ РЕСОЯВ	TUBING, CASING, AND	
5, 2001-15, KB *	7818t 1818-33	4230-64, KB
70 holes Depth Casing Shoe	Jes <u>5 12PF 35',</u>	_
4230, BK 2363, KB 100 Olives 844	Neme of Producing Formation	Elevations (DF, RKB, RT, GR, etc.)
10191 Deptit	Date Compl. Ready to Prod.	Date Spudded
New Well Workover Deepen Plug Back Same Res'v. Diff. Res.v	(X) Nell Gas Well	Designate Type of Completion —
		MING MOUTE HAILOUT

Actual Prod. Dunng Test	.eld8 - ItO	Water · Bbls.	G88 - MCF
reudin or rest	Tubing Pressure	Casing Pressure	Слоке Size
Length of Test	Tubing Pressure	Casing Pressure	62:S 64040

3/¢ 11	Casing Pressure (Shut-in)	(ni-Jufle) Pressare (Shul-In)	Testing Method (pilot, back pr.) Back Pressure
Gravily of Condensate	Bbls: Condensate/MMCF	Length of Test	Actual Prod. Test - MCF/D
			GAS WELL

* 2 JSPF 52', 104 holes

197-2728 .90-1049 148-0529 2310-14, 2506-14 1283-87 186-7/19

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J.S.G.S.		_											
AND OFFICE	OIL GAS				RE	QUEST FO		ABLE	OIL C	ON. DIST. 3		÷	
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Operator Tenne	eco C	il Com	pany										
Address													
	. Box	3249.	Englew	vood.	, CO	80155							
Reason(s) for filing (Che								Other (Please e	explain)				
New Well			Transporter of	f-			1						
7		Oil	714.10po.10. 0.			ry Gas							
Recompletion		= -	inghead Gas		<u> </u>	ondensate							
Change in Owners	nip	L_J Cas	ingliead Gas										
change of ownership g nd address of previous	give names s owner_	e 				· · · · · · · · · · · · · · · · · · ·							
. DESCRIPTION	OF W	ELL AND	LEASE _			· · · · · · · · · · · · · · · · · · ·			Kind of Lea		USA		Lease No.
Lease Name Schwerdt	fogov	A 15	Well 20	OM	Pool Name	Including Form Basin D	akota		State, Fede		SF		079319
Schwerat	reger	A LJ		511							<u> </u>		0/9319
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Unit Letter		:_	2020		_ Feet From	The Sou	tn			F8			
Line of Section	8 N OF T	::	Township		27N		Range	8W		, NMPM,	San	Juan	County
II. DESIGNATION Name of Authorized Trai CONOCO I Name of Authorized Trai	N OF T	Surface of Casinghead	Township RTER OF C Condensate Transpe Gas or Dry	OIL AN	27N ND NATU		Address (G) P. 0 Address (G)		hich approved c 50 , Hobb hich approved c	NMPM, opy of this for opy of this for opy of this for one of this form.	San	Juan	
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ьяде 5 Form C-104 Revised 10-01-78 Format 06-01-63

Gas - MCF	Water - Bbls.	Oil - Bbls.	Actual Prod. During Test
Сһоже Ѕіде	Casing Pressure	Fressure	iseT to digne.
(3)	Producing Method (Flow. pump. gas lift. e	Date of Test	Date First New Oil Run To Tanks
le of load oil and must be equal to or exceed top al	(Test must be after recovery of total volun depth or be for full 24 hours)	S ALLOWABLE OIL WELL	V. TEST DATA AND REQUEST FOR
	1326, KB	2 3/8" tubing	
S20 8x 33t CE	24I1-7450' KB	4 1/2" casing liner	"t/I 9
637 sx, 1073 CF	2210, KB	7" casing	8 3/4"
S20 8x3 S32 CF	314, KB	9 5/8 casing	12 1/4"
SACKS CEMENT	DEPTH SET	CASING & TUBING SIZE	SZIS SIOH
	П СЕМЕИТІИВ ВЕСОВО	TUBING, CASING, AN	
		1376-801, 7404-181	7246-59, 7336-68,
Depth Casing Shoe			bedoestions 2 12PF, 35, 70 P
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	7246' KB	Dakota	6733' GR
Tubing Depth	Yed Sa2\liO qoT	Name of Producing Formation	Elevations (DF, RKB, RT, GR, etc.)
7443, KB	\ 423. KB	15/55/85	10/11/82
.0.1.8.9	Total Depth	Date Compl. Ready to Prod.	Date Spudded
oen Piug Back Same Res'v. D	New Well Workover Dee	(X) Oil Well Gas Well	Designate Type of Completion —
			IV. COMPLETION DATA

-	•				
M	'	S١	۷!	์ פ	

3\4"	822	1395	Back Pressure
Choke Size	Casing Pressure (Shut-in)	Tubing Pressaure (Shut-in)	Testing Method (pilot, back pr.)
		3 hrs	986
Gravity of Condensate	Bbls. Condensate/MMCF	Length of Test	Actual Prod. Test - MCF/D
			GAS WELL