DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION Form C -104 ANTA FE REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-1. ILE Effective 1-1-65 AND .s.G.s. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE **TRANSPORTER** GAS OPERATOR 1 PRORATION OFFICE 30-045-23582 Operator Tenneco 0il Company Address 720 S. Colorado Blvd., Denver, CO 80222 Reason(s) for filing (Check proper box) Other (Please explain) <u>X</u> Change in Transporter of: Dry Gas Recompletion OH Change in Ownership If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE. Well No., Pool Name, Including Formation *US/\-NM-013860-A Kind of Lease Lease No. Russell Com 1 Basin Dakota State, Federal or Fee Federal 1080 Feet From The South Line and 815 Feet From The West Unit Letter _____M 8W San Juan 23 28N Township Range NMPM. County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate X Address (Give address to which approved copy of this form is to be sent) Giant Refining P.O. Box 256, Farmington, New Mexico 87401 Name of Authorized Transporter of Casinghead Gas Address (Give address to which approved copy of this form is to be sent) P.O. Box 990, Farmington, New Mexico El Paso Natural Gas 87401 Is gas actually connected? If well produces oil or liquids, M 23 28N No **ASAP** - 8₩ give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Ggs Well New Well Workover Same Res'v. Diff. Res'v. Designate Type of Completion - (X) χ Total Depth Date Spudded Date Compl. Ready to Prod. 10/16/79 11/21/79 6890' 6864 Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth 6622' Dakota 6760' Depth Casing Shoe 6622-6870 (128 shots) TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 12 1/4" 9 5/8" 200 3/4" 29981 650 6 1/4" 6890' 4 1/2" 500 2 3/8" 6760' (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Casing Pressure Oil-Bbls. Water - Bbls. Actual Prod. During Test DEC 13 1979 OIL CON COM. **GAS WELL** of Cortain Length of Test Actual Prod. Test-MCF/D Bbls. Condensate/MMCF 3hours Casing Pressure (Shut-in) esting Method (pitot, back pr.) Tubing Pressure (Shut-in) Choke Size 3/4" 2075 back pressure 2100 VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION DEP 1 3 1979

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.

Party Hitters	
(Signature) Administrative Supervisor	
12/1/Title)/>9	
(Date)	

APPROVED.

BY.

TITLE .

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.

This form is to be filed in compliance with RULE 1104.

Original Signed by A. R. Kendrick

SUPERVISOR DISTRICT 第 3

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. me C-104 must be filed for each and in multiply