

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P.O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Tenneco Oil Company	
Address P. O. Box 3249, Englewood, CO 80155	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Change in Transporter of: Oil <input type="checkbox"/> Dry Gas Casinghead Gas <input type="checkbox"/> Condensate

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Florance C LS	Well No. 10M	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee USA NM	Lease No. 003459
Location Unit Letter 0 : 790 Feet From The South Line and 1900 Feet From The East Line of Section 30 Township 28N Range 8W, NMPM. San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

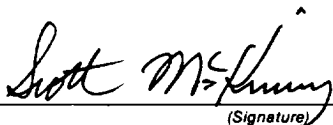
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Conoco Inc. Surface Transportation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 460, Hobbs, NM 88240					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4990, Farmington, NM 87499					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 30	Twp. 28N	Rge. 8W	Is gas actually connected? No	When 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.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.


(Signature)

Senior Regulatory Analyst
(Title)

1/14/86
(Date)

OIL CONSERVATION DIVISION

APPROVED 
BY Original Signed by FRANK T. CHAVEZ
SUPERVISOR DISTRICT 3

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

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.

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

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion — (X)		Oil Well	Gas Well	XX	New Well	XX	Workover	Deepen	Plug Back	Same Res.v.	Diff. Res.v.
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Date Spudded	10/30/85	Date Compl. Ready to Prod.	1/9/86	Total Depth	7140' KB	P.B.T.D.	7101' KB
Elevations (D.F., RKB, RT, GR, etc.)	6368' GL	Name of Producing Formation	Dakota	Top Oil Gas Pay	7024' KB	Tubing Depth	7031' KB
Perforations	2 JSPF 27', 54 holes						
7024-51' KB							
Depth Casing Shoe							
7137' KB							

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	9 5/8" csq	290' KB	250 sx, 295 CF
8 3/4"	7" csq	5388' KB	1573 sx, 2725 CF
6 1/4"	4 1/2" csq liner	5211-7137' KB	260 sx, 412 CF
	2 3/8" tbq	7031' KB	

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 top 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 - MCF

GAS WELL

Actual Prod. Test - MCF/D	1176	Length of Test	3 hrs	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Back Pressure	Tubing Pressure (Shut-in)	2052	Casing Pressure (Shut-in)	pkv
				Choke Size	3/4"