40. JF COPIES SECS	14.0	1	ļ
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.		Ĭ	
LAND OFFICE			
TRANSPORTER	OIL	<u> </u>	
	GAS		
OPERATOR			
PRORATION OFFICE		Ì	

## NEW MEXICO OIL CONSERVATION COMMISSION

Form C+104

SANTA FE	REQUEST F	FOR ALLOWABLE	Supersedes Old C-104 and C- Effective 1-1-65		
FILE		AND	•		
U.S.G.S.	_ AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GAS	•		
LAND OFFICE	4				
TRANSPORTER OIL	-{				
GAS	-{				
OPERATOR					
Operation OFFICE					
Tenneco Oil Compa	nv				
Address	11 <u>y</u>				
	nglewood, CO 80155				
Reason(s) for filing (Check proper be	ilgiewood, co 80133	Other (Please explain)			
I	Change in Transporter of:	İ	•		
	Oil Dry Go	. [			
Recompletion Change in Ownership	Casinghead Gas Conden	sare 🔲			
Change in Ownership					
If change of ownership give name					
and address of previous owner					
	LEASE				
I. DESCRIPTION OF WELL AN	Well No. Pool Name, Including F	ormation Kind of Lease	Lease No		
Omler A	5E Basin Dakota	State, Federal o	Fee Federal SF 077085		
Location	32 3433				
L -	50 Feet From The North Lin	e and 890Feet From Th	• West		
Unit Letter:	Feet From The				
25	ownship 28N Range 10	W , NMPM, San Ju	an County		
Line of Section 25	Ownship Lott				
TO ANCHO	TER OF OU AND NATURAL GA	AS			
Name of Authorized Transporter of (	RTER OF OIL AND NATURAL GA	Andress (Give address to which approve	d copy of this form is to be sent)		
Conoco		Box 460, Hobbs, New Me	xico 88240		
Name of Authorized Transporter of	asinghead Gas or Dry Gas XX	Address (Give address to which approve	d copy of this form is to be sent)		
Southern Union Gat		Box 880, Farmington, N	ew Mexico 87401		
	Unit Sec. Twp. P.ge.	Is gas actually connected? When			
If well produces oil or liquids,	E 25 28N 10W	No ! AS	AP		
give location of tanks.		nine enmanding order number:	•		
If this production is commingled	with that from any other lease or pool,	Five Committeeing order names.			
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'		
Designate Type of Comple	tion $-(X)$	X	<u> </u>		
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Date Spudded 1/17/81	3/25/81	6465"	6444		
		Top Oil/Gas Pay	Tubing Depth		
Elevations (DF, RKB, RT, GR, etc. 5802' gr.	Dakota	6268	6298 5		
	Dakota	0200	Depth Casing Shoe		
Perforations	6205 061 6422 361				
6268-751, 6323-281	6385-96', 6413-16'	D CEMENTING RECORD			
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
HOLE SIZE		301'	200 sx		
12-1/4"	9-5/8" 36#	4699'	1st: 300 sx, 2nd: 1030		
8-3/4"	7" 23#	6464	272 sx		
6-1/4"	4-1/2" 10.5#	6298'			
		after recovery of total volume of load oil e	nd most be sold to organised top alic		
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be able for this a	(SDIV OL DE JO. INT. 34 VOM. 1)			
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	F-WLILLY LON		
Date First New Oll Aug 16 1 dates		1	No.		
	Tubing Pressure	Casing Pressure	CHAMP R 1 1981		
Length of Test		4	011 0011 0011		
	Ou-Bbis.	Water-Bbls.	BIL WEFN COM.		
Actual Prod. During Test	Ott-Bate.		DIST. 3		
GAS WELL	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate		
Actual Prod. Test-MCF/D	·				
1444	3 hrs. Tubing Pressure (Shut-is)	Cosing Pressure (Shut-in)	Choke Size		
Testing Method (putot, back pr.)	·	920 PSI	3/4"		
Back Pressure	1010 PSI		TION COMMISSION		
VI. CERTIFICATE OF COMPLI	ANCE	OIL CONSERVA	14014 <b>33</b> 000		
	·	APPROVED APR 7	JUI		
I hereby certify that the rules a	nd regulations of the Oil Conservation	APPROVED			
I hereby certify that the rules and regulations of the information given Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		Original Signed by FRANK T. CHAVEZ			
above is true and complete to	above is true and complete to the best of my another		TITLE SUPERVISOR DISTRICT # 3		
	/ ,				
	4 /	This form is to be filed in	compliance with RULE 1104.		
	atter	- 11			
( tholly	Signature)				
,	•				
Assistant Division A	dministrative Manager		est be filled out completely for allo		
	(Title)		. THE AND UT TO CHENCES OF OWN!		
March 26, 1981	March 26, 1981		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.		
	40	Matt Baue or noment or grannt.	-		
	(Date)	Separate Forms C-104 mus	t be filed for each pool in multip		