80. JF CDP188 BEC	E14.0	1	
DISTRIBUTION			Γ
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE		1	
Operator Tenneco	0il	Comp	any

	h	NEW MEXICO OIL CONSERVATION COMMISSION		Form C - 104	
	REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-		
	FILE	FILE		Effective 1-1-65	
	U.S.G.S.	_ AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL (GAS	
	LAND OFFICE		THE SECTION OF THE COURSE OF	3~3	
	TRANSPORTER OIL				
	GAS				
	OPERATOR				
1	PRORATION OFFICE	7			
•	Operator				
	Tenneco Oil Compan	y			
	Address				
	P.O. Box 3249, Eng	lewood Colorado 80155			
	Reason(s) for filing (Check proper bo	x)	Other (Please explain)		
	New Well	Change in Transporter of:	i		
	Recompletion	Oil Dry Go			
	Change in Ownership	Casinghead Gas Conde	nsate	•	
	If change of ownership give name				
	and address of previous owner				
	DESCRIPTION OF WELL AND	LEASE			
	Lease Name	Well No. Pool Name, Including F	ormation Kind of Leas	e Lease No	
	Cole A	1E Basin Dakota	State, Federa	aler F•• Federal 079508	
	Location				
	1 17	501 Feet From The South Li	900	Fact	
	Unit Letter;1/	Feet From The SOULII Lis	ne and O3U Feet 7rom	The <u>East</u>	
	Line of Section 35 To	ownship 28N Range	10W . NMPM. San Ji	lan G-	
	Line of Section 35 To	ownship Z8N Range	IUW , NMPM, San Ji	Jan County	
	DECICE ATION OF TRANSPOR	TED OF OUL AND NATURAL CO	.c		
111.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Or Condensate Andress (Give address to which approved copy of this form is to be sent				
	_		Box 460 Hobbs, New Mex		
	CONOCO Name of Authorized Transporter of Co	esinghed Gas or Dry Gas	Address (Give address to which appro		
	1	-	Box 990 Farmington, New		
	<u>El Paso Natural Ga</u>	Unit Sec. Twp. P.ge.	Is gas actually connected? Wh		
	If well produces oil or liquids,	I 35 28N 10W		ASAP	
	give location of tanks.		No	ASAP	
		ith that from any other lease or pool,	give commingling order number:	·	
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Rest	
	Designate Type of Completi		X	Programme resident	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	8/2/80	9/20/80	6542'	6493'	
	Elevations (DF, RKB, RT, GR, etc.,		Top Oil/Gas Pay	Tubing Depth	
	5889' gr.	Dakota	6256'	6236'	
	Perforations	Dakota	0250	Depth Casing Shoe	
	1 7 77	, 6336-66', 6399-6401', 6	3/13-17!		
	0230-30 , 0203-00				
			D CEMENTING RECORD	TARKE SEVENT	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	200sx	
	8 3/4"				
	0 3/4	7" 23#	6541'	1050sx	
		<u> </u>			
	l <u></u>	<u></u>			
V.		FOR ALLOWABLE (Test must be a	ifier recovery of total volume of load oil epth or be for full 24 hours;	and must be equal to or exceed top allo	
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft. etc.)	
	Date First New Cit Nam 10 1012	54.5 0. 745.			
	Length of Teet	Tubing Pressure	Casing Pressure	Choke Sta	
	Length of 1001	1.22.4			
	Actual Prod. During Test	Oil-Bble.	Water - Bbls.	Gue-MCF 50	
	Actual Pibe. During 1011	J. 23.5		1/500	
	i		1	THEO I COM	
			,	- CO. 3	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Carriy of Condensary	
	1687]_ ,			
	Testing Method (putot, back pr.)	3 hrs. Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choze Size	
	Back Pressure	,	· •	3/4"	
	<u> </u>	1000 psi	1000 psi		
VI.	CERTIFICATE OF COMPLIAN	ice .		ATION COMMISSION	
			APPROVED		
	I hereby certify that the rules and	regulations of the Oil Conservation	' ' '		
Commission have been complied with and the above is true and complete to the best of my		with and that the information given to best of my knowledge and belief.	of my knowledge and belief. BY		
			TITLE This form is to be filed in compliance with RULE 1104.		
Asst DX Alm m		Million	to this is a request for allowable for a newly drilled or deepen		
		natwe)	well, this form must be accompa- tests taken on the well in acco	inied by a tabulation of the deviati	
		Hom man		reance with NOLE iti.	
		itle)	able on new and recompleted w	elis.	
			II .		

Fill out only Sections I. II. III, and VI for changes of owns well name or number, or transporter, or other such change of condition of the forms C-10K must be filed for each pool in multipartered matter.