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| | GAS |
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-
Effective 1-1-85

I. Operator
Tenneco Oil Company
Address
P.O. Box 3249, Englewood, CO 80155
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☒
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|-----------------|---|--|--------------------|
| Lease Name Omler A | Well No. 7-E | Pool Name, including Formation Bloomfield Chacra | Kind of Lease State, Federal or Fee Federal | Lease No. 07785 |
| Location Unit Letter J : 1620 Feet From The South Line and 1750 Feet From The East Line of Section 36 Township 28N Range 10W, 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 | Address (Give address to which approved copy of this form is to be sent) Box 460, Hobbs, New Mexico 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) Box 990, Farmington, New Mexico 87401 | |
| If well produces oil or liquids, give location of tanks. | Unit J | Sec. 36 |
| | Twp. 28N | Rge. 10W |
| | Is gas actually connected? No When ASAP | |

If this production is commingled with that from any other lease or pool, give commingling order number:

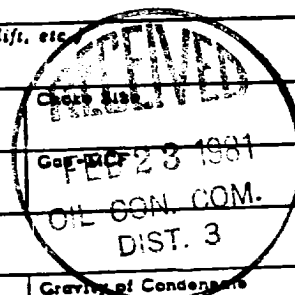
IV. COMPLETION DATA

| | | | | | | | | | |
|---|--|--------------------------|-----------|-----------------------|--------------|--------|-----------|-------------|-------------|
| Designate Type of Completion - (X) | | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res't. | Diff. Res't |
| | | | X | X | | | | | |
| Date Spudded 8/20/80 | Date Compl. Ready to Prod. 10/28/80 | Total Depth 6546' | | P.B.T.D. 6520' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 5937' gr. | Name of Producing Formation Chacra | Top Oil/Gas Pay 3058' | | Tubing Depth 3208' | | | | | |
| Perforations 3058-66', 3072-73' | | | | Depth Casing Shoe | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | | |
| 12-1/4" | 9-5/8" 36# | | 259' | | 225 sx | | | | |
| 8-3/4" | 7" 23# | | 6540' KB | | 1st: 270 sx | | | | |
| | | | | | 2nd: 825 sx | | | | |
| | 1-1/4" | | 3058' | | 3rd: 1050 sx | | | | |

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 WELL

| | | | |
|---|--------------------------------------|--------------------------------------|-----------------------|
| Actual Prod. Test-MCF/D 1138 | Length of Test 3 hrs. | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) Back Pressure | Tubing Pressure (Shut-in) 950 PSI | Casing Pressure (Shut-in) 950 PSI | Choke Size 3/4" |

VI. CERTIFICATE OF COMPLIANCE

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.

Carley Hatten
(Signature)

Assistant Division Administrative Manager
(Title)

February 16, 1981
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 23 1981, 19

BY Original Signed by FRANK T. CHAVEZ

TITLE 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 deepen well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells 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 conditions.
Separate Forms C-104 must be filed for each pool in multi-pool wells.