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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

Form O-104
Supersedes O-104 and O-
Effective 1-1-85

I. Operator
Tenneco Oil Company
Address
720 S. Colorado Blvd., Denver, CO 80222
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. 1E	Pool Name, including Formation Undesignated Chacra	Kind of Lease State, Federal or Fee Federal	Lease No. 82-07785
Location Unit Letter F ; 1830 Feet From The North Line and 1590 Feet From The West Line of Section 26 Township 28N Range 10W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Conoco	Address (Give address to which approved copy of this form is to be sent) Box 460, Hobbs, NM 88240					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) Box 990, Farmington, NM 87401					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					NO	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 7/16/80	Date Compl. Ready to Prod. 8/29/80		Total Depth 6580'		P.B.T.D. 6456'			
Elevations (DE, RKE, RT, GR, etc.) 5787' gr.	Name of Producing Formation Chacra		Top Oil/Gas Pay 2835'		Tubing Depth 5896'			
Perforations 2835-37', 2942-48'					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	9 5/8" 36#		343'		250 SX			
8 3/4"	7" 23#		6577'		720 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)

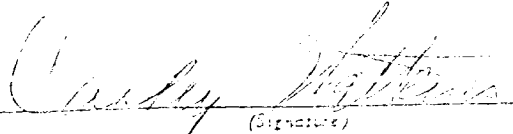
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Testing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1741	3 hrs		
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	1020 PSI	1020 PSI	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.


(Signature)

Carley Watkins, Asst. Div. Adm. Mgr.

(Title)

September 29, 1980

(Date)

OIL CONSERVATION COMMISSION

MAR 1 1981

APPROVED _____, 19

BY Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT #

TITLE _____

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 deviate tests taken on the well in accordance with RULE 1111.

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 change of owner, well name or number, or transporter or other such change of condition.

Separate Forms O-104 must be filed for each pool in multi-pool completed wells.