DISTRIBUTION  SANTA FE  FILE  U.S.G.S.  LAND OFFICE  TRANSPORTER  OPERATOR  PRORATION OFFICE  Operator  Tenneco Oil Comparadors  Box 3249, Englewood  Reason(s) for filing (Check proper box  New Well  Recompletion  Change in Ownership						
SANTA FE  FILE  U.S.G.S.  LAND OFFICE  IRANSPORTER  GAS  DPERATOR  PRORATION OFFICE  Operator  Tenneco Oil Companadadress  Box 3249, Englewood  Ressen(s) for filing (Check proper box, New Well  Recompletion			L			
U.S.G.S.  LAND OFFICE  IRANSPORTER GAS  DPERATOR  PRORATION DFFICE  Operator  Tenneco Oil Compar  Address  Box 3249, Englewoo  Reason(s) for filing (Check proper bos  New Well  Recompletion	DISTRIBUTIO	DISTRIBUTION				
U.S.G.S.  LAND OFFICE  TRANSPORTER OIL  GAS  DPERATOR  PRODUCTION  Tenneco Oil Companation  Address  Box 3249, Englewood  Reason(s) for filing (Check proper box  New Well  Recompletion	SANTA FE					
LAND OFFICE  I RANSPORTER OIL  GAS  OPERATOR  PRORATION OFFICE  Operator  Tenneco Oil Compan  Address  Box 3249, Englewoo  Ressen(s) for filing (Check proper bos  New Well  Recompletion	FILE					
TRANSPORTER OIL GAS  DPERATOR  PRORATION OFFICE  Operator  Tenneco Oil Compani Address  Box 3249, Englewoo  Reason(s) for filing (Check proper box New Well  Recompletion	U.S.G.S.					
DPERATOR  PRORATION OFFICE  Operator  Tenneco Oil Compani Address  Box 3249, Englewood  Ressen(s) for filing (Check proper box  New Well  Recompletion	LAND OFFICE					
DPERATOR  PRORATION OFFICE  Operator  Tenneco Oil Compan  Address  Box 3249, Englewood  Reason(s) for filing (Check proper box  Now Well  Recompletion	I DAMEDORT FR	OIL				
PRORATION OFFICE  Operator  Tenneco Oil Compar  Address  Box 3249, Englewoo  Reason(s) for filing (Check proper box  Now Well  Recompletion		GAS				
Tenneco Oil Compar Address  Box 3249, Englewoo Ressen(s) for (-ling (Check proper box New Well Recompletion	DPERATOR					
Tenneco Oil Compar Address  Box 3249, Englewoo Ressen(s) for (:ling (Check proper box New Well Recompletion		ICE		<u> </u>		
Box 3249, Englewood Reason(s) for filing (Check proper box, New Well Recompletion		Oil	Соп	ıpaı		
Reason(s) for filing (Check proper box Now Well Reasonplation	Address					
Now Well XX Recompletion	Box 3249, Englewood					
Recompletion	Reason(s) for filing		HOPEI	bos,		
<b>F</b>	Now Well	KX.				
Change in Ownership						
	Change to Ownership	<u></u>				

## NEW MEXICO DIL CONSERVATION COMMISSION

	SANTA FE	. REQUEST I	FOR ALLOWABLE	Superardes Oid C-106 and C- Effective 1-1-65
ł	FILE			
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATU	RAL GAS
1	LAND OFFICE			
1	DIL			
ı	TRANSPORTER GAS			
- 1	DPERATOR	1		
_	PRORATION OFFICE	1		
3.	Operator			
	Tenneco Oil Compan	ny		
	Address			
	Box 3249, Englewoo	od, CO 80155		
	Reason(s) for filing (Check proper bos)		Other (Piease expia	19/
	New Well	Change in Transporter of:		•
	Recompletion	Oil Dry Go	• 🗀	
	Change in Ownership	Casinghead Gas Conden	12 UT 0	·
ì				
	If change of ownership give name			
	and address of previous owner			
_	·	FACE		
П.	DESCRIPTION OF WELL AND I	Well No.; Pool Name, Including F	primation Kind	Federal Lesse No
:	Onler M	Sloomfiel	daChacra Stote	. Federal er Fee SF 077085
	Lecation			
,		Worth	e mad 930 Fe	et From The West
	Unit Letter D : 990	Feet From The North Lin		
		mahin 28N Range	LOW , NMPM,	San Juan County
	Line of Section 36 Tov	mahip 28N Mange	· · ·	
		TER OF OU AND NATURAL GA		
m.	NEED of Authorized Transporter of Oil	FER OF OIL AND NATURAL GA	Asciess (Give address to whi	ch approved copy of this form is to be sent.
	_	<u> </u>	Box 460, Hobbs, N	ew Mexico 88240
	Conoco	inghead Gas Ory Gas X	: Address (Give address to whi	ch approved copy of this form is to be sent)
	Name of Authorized Transporter of Cas	Tingnada das [ ]	Box 990, Farmingt	
	El Paso Natural Ga		Is gas actually connected?	When
	If well produces oil or liquids,	, 5.2.	}	ASAP
	give location of tanks.	D 36 28N 10W	No	
	If this production is commingled wit	th that from any other lease or pool,	give commingling order num	ber:
IV.	COMPLETION DATA	Oil Well Gas Well		epen Plug Bock Same Resty. Diff. Rest
	Designate Type of Completic	<b>.</b>	X	
	Designate Type of Completion	· · · · · · · · · · · · · · · · · · ·	Total Depth	P.B.T.D.
	Date Spudded	Date Compl. Ready to Prod.	6524'	6514'
	1/7/81	3/12/81	Top Oti/Gas Pay	Tubing Depth
	Elevetions (DF, RKB, RT, GR, etc.,	Name of Producing Formation	2995'	2997'
•	6856' gr.	Chacra	2995	Depth Casing Shoe
	Perforations			
	2995-2997'		- AFTENTINE BECARD	
			D CEMENTING RECORD	SACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE	270'	225 sx
	12-1/4"	9-5/8" 36#		1st: 300sx, 2nd: 545sx
	8-3/4"	7" 23#	4760' 6523'	250sx
	6-1/4"	4-1/2" 10.5#		2997'
		1-1/4"		
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be	after recovery of total volume 0; 'epth or be for full 24 hours)	load oil and must be squal to or exceed top alic
•	OII. WELL		Producing Method (Flow, PM	np, gas lift, etc.)
	Date First New Oil Run To Tanks	Date of Test	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	all Inc
:			Cosing Pressure	of the state of
	Length of Test	Tubing Pressure		ONITINE /
			Water - Bhis.	JUN 2 6 1987
	Actual Pred. During Test	Ou-Bhis.	1	96 1981
		<u> </u>		Jour COM.
			\	OIL CON. COM.
	GAS WELL		Bhis. Condensate/MMCF	OIL CON. 3 DET 3
	Actual Prod. Test-MCF/D	Length of Test 3 hrs.	32.5. 65.26.65.05.05.05	
	1628		Casing Pressure (Shut-18	Chore Size
	Testing Method (pizzt, back pr.)	Tubing Pressure (Shut-12)	1	3/4"
	◆Back Pressure	-1935, PSI	1050 PSI	
VI	CERTIFICATE OF COMPLIAN	ICE	OIL CON	ISERVATION COMMISSION
MIN 26 130				MIN 26 198]
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		<b>3</b> 11	
		with and that the information gives as beat of my knowledge and belief	original signed b	y Frank T. Chavez
	above is true and complete to th		empcovii.	SOR DISTRICT # 3
			TITLE	
		<i>/</i>	This form is to be	filed in compliance with RULE 1104.
	('11.11 )	7/1/2	11	drilled or deeper
	- wrey !	Maine)		
			Il acces taken on the well	I IN ECCOMMENCE WITH HOLE
	Assistant Division Admi	Intactactve hanager	All secuens of thi	s form must be filled out completely for all

(Title)

(Dese)

March 13, 1981

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

Fill out only Sections 1. II. III. and VI for changes of owns well name or number, or transporter, or other such change of conditions are presented from C-104 must be filled for each pool in multiple of the change of conditions.