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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 C-104
Supersedes Old C-104 and C-11
Effective 1-1-65

1.

Operator Tenneco Oil Company		
Address P. O. Box 3249, Englewood, CO 80155		
Reason(s) for filing (Check proper box)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input checked="" type="checkbox"/>
Other (Please explain)		

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Florance	Well No. 30A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee	Lease No. Federal SF 078596-A
Location				
Unit Letter <u>E</u> ; <u>1845</u> Feet From The <u>North</u> Line and <u>980</u> Feet From The <u>West</u>				
Line of Section <u>1</u> Township <u>29N</u> Range <u>8W</u> , NMPM, <u>San Juan</u> 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"/>	Address (Give address to which approved copy of this form is to be sent)					
Caribou Four Corners	Box 175, Kirtland, New Mexico 87417					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Southern Union Gathering Company	Box 808, Farmington, New Mexico 87401					
If well produces oil or liquids, give location of tanks.	Unit <u>E</u>	Sec. <u>1</u>	Twp. <u>29N</u>	Rge. <u>8W</u>	Is gas actually connected? <u>Yes</u>	When <u>3/8/77</u>

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'v.	Diff. Res'v.
		<u>X</u>	<u>X</u>					
Date Spudded <u>11/22/76</u>	Date Compl. Ready to Prod. <u>1/10/77</u>		Total Depth <u>5565'</u>		P.B.T.D. <u>5518'</u>			
Elevations (DF, RKB, RT, GR, etc.,) <u>6338' gr.</u>	Name of Producing Formation <u>Blanco Mesa Verde</u>		Top Oil/Gas Pay <u>5176'</u>		Tubing Depth <u>5359'</u>			
Perforations <u>5176-5355', 4641-5053', Blanco Mesa Verde</u>					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>12-1/4"</u>	<u>9-5/8"</u>		<u>238'</u>		<u>225 SX</u>			
<u>8-3/4"</u>	<u>7"</u>		<u>3324'</u>		<u>425 SX</u>			
<u>6-1/8"</u>	<u>4-1/2"</u>		<u>3032-5565'</u>		<u>260 SX</u>			

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	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Grav. Sp. Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

David M. Far
(Signature)
Production Analyst
(Title)
July 28, 1981
(Date)

OIL CONSERVATION COMMISSION
AUG 3 - 1981

APPROVED _____, 19____
BY Original Signed by FRANK T. CHAVEZ
SUPERVISOR DISTRICT # 3
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 deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable 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 condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.