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|------------------|-----|--|--|------------------------------|
| DISTRIBUTION | | NEW MEXICO OIL CONSERVATION COMMISSION | | Form C-104 |
| SANTA FE | | REQUEST FOR ALLOWABLE | | Supersedes Old C-104 and C-1 |
| FILE | | AND | | Effective 1-1-65 |
| U.S.G.S. | | AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS | | |
| LAND OFFICE | | | | |
| TRANSPORTER | OIL | | | |
| | GAS | | | |
| OPERATOR | | | | |
| PRORATION OFFICE | | | | |

API 30-045-23344

Operator
Tenneco Oil Company

Address
720 South Colorado Blvd., Denver, Colorado 80222

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE * USA-SF-078416-A

| | | | | |
|------------|----------|--------------------------------|-------------------------------|-----------|
| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease | Lease No. |
| Wilch | 2 | Dakota | State, Federal or Fee Federal | * |

Location

Unit Letter B ; 960 Feet From The North Line and 1730 Feet From The East

Line of Section 25 Township 29-N Range 8-W , NMPM, San Juan County

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) |
| Giant Refining Co. | Box 256, Farmington, New Mexico 87401 |
| 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) |
| El Paso Natural Gas Co. | Box 990, Farmington, New Mexico 87401 |

| | | | | | | |
|--|------|------|------|------|----------------------------|------|
| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. | Rge. | Is gas actually connected? | When |
| | B | 25 | 29N | 8W | No | ASAP |

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

COMPLETION DATA

| | | | | | | | | |
|------------------------------------|----------|----------|----------|----------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| | | X | X | | | | | |

| | | | |
|--------------|----------------------------|-------------|----------|
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. |
| 6/12/79 | 6/22/79 | 7900' | 7890' |

| | | | |
|------------------------------------|-----------------------------|-----------------|--------------|
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth |
| 6730' GL | Dakota | 7646' | 7642' |

Perforations
88 holes from 7646' to 7878'

Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

| | | | |
|-----------|----------------------|-----------|--------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 12 1/4" | 9 5/8" | 222' | 150 |
| 8 3/4" | 7" | 3799' | 680 |
| 6 1/4" | 4 1/2" | 7900' | 600 |
| | 2 3/8" | 7642' | |

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. | Gravity of Condensate |
| | | | |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| 2711 | 3 Hours | | |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |
| back pressure | 1940 | 1975 | 3/4" |

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 Statham
(Signature)
Administrative Supervisor
(Title)
8/9/79
(Date)

OIL CONSERVATION COMMISSION
APPROVED SEP 7 1979
BY Original Signed by A. R. Kendrick
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 multiple