J. U. CU	•	L	
DISTRIBUTION			
ANTA FE			
TILE			
		<u> </u>	
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	<u> </u>	
OPERATOR		T	

ţ	DISTRIBUTION ANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND		Form C-104 Supersedes Old C-104 and C-114 Effective 1-1-65				
Ì	S.G.S. LAND OFFICE IRANSPORTER OIL	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
-	GAS OPERATOR							
1.	PRORATION OFFICE							
	Tenneco Oil Company							
	Address P.O. Box 3249, Englewood	, CO 80155						
- 1	Reason(s) for filing (Check proper box)	Other (Please explain) Change in Transporter of:						
1	New Well Recompletion	Oil Dry Gas						
	Change in Ownership	Casinghead Gas Condensate						
1	f change of ownership give name and address of previous owner			<u> </u>				
n.	DESCRIPTION OF WELL AND L	Well No. Pool Name, Including Form	nation	Kind of Lease	USA Lease No. 078596-A			
	Florance	123E Blanco Pictured	Cliffs	State Federal er	Fee NM 0/8596-A			
	Location Unit Letter M 910	1100 W June and 960' Feet From The W						
		ship 29N Range 8W	, NMPM	, San Juan	County			
	Line of Section 3							
III.	DESIGNATION OF TRANSPORT	J. 55	Address (Give address Box 460, Hobb	to which approved	copy of this form is to be sen:)			
	Conoco Inc., Surface Tr	ransportation	10 - 11-000	to which approved	copy of this form is to be sent)			
	El Paso Natural Gas Cor	npany	P.O. Box 149		17 73370			
	If well produces oil or liquids, give location of tanks.	Unit Sec. Iwr.	NO	AS	AP			
	If this production is commingled with	h that from any other lease or pool, g	ive commingling orde	r number:				
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen F	Plug Back Same Resty. Diff. Resty.			
	Designate Type of Completio	n - (X) X Date Compl. Ready to Frod.	X Total Depth		P.B.T.D.			
	Date Spudded 10-14-83	11-29-83	7560' KB		7552' KB			
	Elevations (DF, RKB, RT, GR, etc.,	i and co	2015 KB		2960' KB			
	6319 KB Perforations (PC) 3015-3017	Pictured Cliffs KB, 3023-3025 KB,3028	-3042KB,3050-3	3024 KB	Depth Casing Shoe			
	3060-3066' KB		AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	301 KB	SET	SACKS CEMENT 265 CF			
	12-1/4"	9-5/8"	3650' KB		764 CF			
	8-3/4" 6-1/4"	4-1/2"	7560' KB(T	op 3500')	625 CF			
	6-1/4"	1 1 / / / /	2960' KB					
•	. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be as able for this de	DEA OF DE JOY JULI 24 AUG		nd must be equal to or exceed top allow-			
·	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (FI	or Damp sage #/t				
		Tubing Pressure	Casing Pressure	11.24	Choke Size			
	Length of Test		Water - Bbls.		(9 198 3 Gae-Mof			
-	Actual Prod. During Test	Oil-Bbls.		Office	DIV			
			z⊕e € °	3				
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/Mi	MCF	Gravity of Condensate			
	1339	3 hrs	Casing Pressure (St	ut-in)	Choke Size			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in) 795 psi	820 psi		3/4"			
,	Back Pressure VI. CERTIFICATE OF COMPLIA		011	L CONSERVA MI/\	TION COMMISSION			
,	_		APPROVED	MAR 02 1984 . 19				
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given commission have been complied to the heat of my knowledge and belief.			BY Original Signed by FRANK T. CHAVEZ				
above is true and complete to the SUPERVISOR DISTRICT 第 3								
	0 11 1 0	stand to compliance with RULE 1104.						
	Rondlyh C. Wall			If this is a request for allowable for a newly drilled or deepened 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 well, this form must be accordance with RULE 111.				
	(Signature)			tests taken on the well in account be filled out completely for allow				
		Title)	able on new an	able on new and recomplated world				
	12-12-83 (Date)		well name or nu	Fill out only Sections I. II. III, and VI to change of condition well name or number, or transporter, or other such change of condition well name or number.				