Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

## **OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

JAN3 01989

DISTRICT II
P.O. Drawer DD, Astonia, NIM \$8210

OO Rio Brazos Rd., Aziec, NM 874	REQUEST FO	OR ALLOWAE				O	L COI	N. DI' T. 3		
Tenneco Oil E&P					Well /	JPI No.	100			
Tenneco OTT EAP						·				
6162 S. Willow Dr	ive, Englewood	, CO 80111			<u> </u>					
on(s) for Filing (Check proper bo	•*	<b></b>		es (Pioese expi	sin)					
Well Li		Transporter of:  Dry Gas								
ge in Operator	Casingheed Gas	Condensate								
nes of operator give hame										
ddrees of previous operator				<del></del>						
DESCRIPTION OF WEI	L AND LEASE Well No.	Pool Name, Including	e Formatica		Kind	of Lone	ī	esse No.		
Hughes A LS	2 <b>P</b> R	Blanco Mes				Federal or Fee		78049		
tice		1	<u> </u>		Fe	deral Le	ase			
Unit Letter B	. 1125	Feet From The N	orth 🔑	1828	<u>3</u> R	et From The _	<u>Fast</u>	Lit		
07 -	224	_			_			_		
Section 27 Town	whip 29N	Range 8	<u>W . N</u>	мрм,	Sa	n Juan		County		
DESIGNATION OF TR	ANSPORTER OF O	IL AND NATU	RAL GAS							
e of Authorized Transporter of O	il or Conde	isste 🗀	Address (Gir	e address to wi	hick approved	copy of this for	rm is to be a	ent)		
of Authorized Transporter of Co	eriocheed Gee	or Dry Gas 🔞	Address (Cit	e address to sul	hick approved	copy of this fo	rm is to be a	ent)		
El Paso Natural G	<del></del> -			92, E1 Pa						
li produces oil or liquids,	Unit Sec.	Twp. Rec.		y connected?	When					
ocation of tanks.	ii	<u> </u>		<del>-</del>	i_					
production is commingled with t	that from any other lease or	pool, give commingle	ing order mum	ber:			<del> </del>			
COMPLETION DATA	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Per'y	Diff Res'		
esignate Type of Completi		X	1.00m M.00	WOLLOVE	<del>Despie</del>	ring sec.	Mile Ket v			
Spudded	Date Compl. Ready to	Prod.	Total Depth			P.B.T.D.				
7/12/88		8/1/88		6050'			The Death			
nions (DF, RKB, RT, GR, etc.) 6747' GL		Name of Producing Formation  Mesaverde		Top Oil/Gas Pay 4974		Tubing Depth 55.96 '				
rations			L_ <del>7</del> 31.4	<del></del>		Depth Casing	Shoe			
See Attached						<u> </u>				
		CASING AND	CEMENTI				10145 OF1			
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET			200 SX (236 ft <sup>3</sup> )			
121"	9 5/	8"	3776'			600 SX (909 ft <sup>3</sup> )				
8 3/4" 6}"	8 3/4		6047'			287 Sx (428 ft <sup>3</sup> )				
0 1	2 3/	8"		96'		V V V V V V V V V V V V V V V V V V V	72.1.			
FEST DATA AND REQU	JEST FOR ALLOW.	ABLE								
	ter recovery of total volume	of load oil and must		exceed top alle			er full 24 hou	(FS.)		
First New Oil Run To Tank	Date of Test		Producing M	eulou (riow, pi	onto, gas ago, (	<b></b> ./				
th of Test	Tubing Pressure	Tubing Pressure			Casing Pressure			Choke Size		
al Prod. During Test	Test Oil - Bbls.		Water - Bbis.			Gas- MCF				
			<u> </u>	<del></del>	<del></del>	<del></del>				
S WELL al Prod. Test - MCF/D	F/D Length of Test		Bbis. Condensate/MMCF			Gravity of Condensate				
41	1 .	3 hrs.								
ng Method (pitet, back pr.)	Tubing Pressure (Shu	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)			Choks Size			
owing	507 psi	507 psi		582 psi						
<b>OPERATOR CERTIF</b>					ISERV	ATION [		วท		
hereby certify that the rules and r				JIL OON	TOLITY		IVD U	Q 1000		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and balief.			Boto Anarosad			MAR 0 8 1989				
0+ T-4			Date Approved							
Sleve tos	er		۱ م		Origina	I Signed by	EDANIN T	CUALIFIE		
grature Coston Co	Aministastius	Analyst	By_			•	-	CHAYE!		
Steve Foster, Sr.	<u>Aministrative</u>	Alld I YST			SŲ	PERVISOR DIS	TRICT 🖀 🕽			

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

(303) 740-2447

Printed Name

1/23/89

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title\_

Telephone No.

- 2) All sections of this form must be filled out for allowable on new and recompleted wells.

  3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

  4) Separate Form C-104 must be filled for each pool in multiply completed wells.

## PERFORATIONS - HUGHES A LS 28 K

5586-5624 (38', 76 Holes)	5266-5294 (28', 56 Holes)	4974-4998 (241, 48)
5636-5648 (12', 24)	5299-5302 (3', 6)	5016-5030 (14', 28)
5664-5672 (8', 16)	5436-5442 (6/, 12)	5084-5104 (201, 40)
5734-5738 (41, 8)		

SF/jm:2767q(2)