| | SANTA FE | | | CONSERVATION CON | | Form C-104 Supersedes Old i | Cally bad Cal | |
|---|---|---|--|---|---------------------------------|--|---------------|--|
| | FILE | | | | | Ettoctive 1-1-55 | | |
| • | LAND OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS | | | | | | | |
| | IRANSPORTER OIL | | | | | | | |
| | GAS / | _ | · | | | | | |
| _ | PERATOR | | | | | | | |
| Operator Tenneco Oil Company | | | | | | | | |
| | | | | | | | | |
| | Address | 1860 Lincoln, Suite 1200 Denver, Colorado 80295 | | | | | | |
| | Reason(s) for trling (Check proper base | 1000 Emaching | | | | | | |
| | New Well | Change In T | consporter of: | | | | | |
| | Recompletion | Oil | Dry Ge | 7-51 | | · | | |
| | Change In Ownership | Casinghead | Gas Conde | asole [] | | | | |
| | chanze of ownership give name nd address of previous owner | | | | | | | |
| | | | | | | | | |
| 11. | Lease Name | | ool Name, Including F | ormation | Kind of Lease | ^3F '980032 | Lease No. | |
| | Florance | 22A | 22A Blanco Mesa | | State, Federal | orfe= Federal | * | |
| | Location | | | | | | | |
| | Unit Letter P: 970 Feet From The South Line and 840 Feet From The East | | | | | | | |
| | Line of Section 12 To | waship 29N | Range | 9W , NMF | 94, | San Juan . | County | |
| | | | | | | 0411 04411 | | |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form | | | | | | | 1 | |
| | Thriftway | | 'AA | 1 | | | | |
| | Name of Authorized Transporter of Castnghead Gas or Dry Gas | | | 2011 E. Main, Farmington N.M. 87401, Address (Give address to which approved copy of this form is to be sent) | | | | |
| | El Paso Natural Gas Co | El Paso Natural Gas Co. | | | Box 990 , Farmington, N.M 87401 | | | |
| | If well produces oil or liquids, Unit Sec. Twp. Pge. give location of tanks. | | | No Near Future | | | | |
| | If this production is commingled with that from any other lease or pool, give commingling order number: | | | | | | | |
| | COMPLETION DATA | | | | • | | | |
| | Designate Type of Completion - (X) | | | New Well Workover | f Deepen ! | Plug Back Same Resty | . Diff. Restv | |
| | Date Spudded | Date Spudded Date Compl. Ready to Prod. | | Total Depth | | P.B.T.D. | _i | |
| | 12/23/76 | 2/6/7 | | 5520' | | <u>5475'</u> | | |
| | Elevations (DF, RKB, RT, GR, etc.) 6419 GL | Name of Products | • | Top Oll/Gas Pay 4655 | | Tubing Depth | | |
| | Perforations | 1 Blanco | Mesa Verde | 1 4000 | | 5423 Depth Castna Shoe | | |
| | 16 Holes 5,264'-5,437; | ······································ | | | | | | |
| | TUBING, CASING, AN HOLE SIZE CASING & TUBING SIZE | | | T | | | | |
| | 12-1/4" | | Casing | 236 | | SACKS CEME 225 Sacks | NT | |
| | 8-3/4" | 7" | Casing | 3340 |)' | 1000 Sacks | | |
| | 6-1/8" | | Casing Lnr Tubing | 2990'-55 | | 275 Sacks | | |
| 1 7 | TEST DATA AND REQUEST F | <u> </u> | | 5423 | | | | |
| ٧. | OIL WELL | pth or be for full 24 hou | irs) | | ceed top attou | | | |
| | Date First New Oil Run To Tanks | Producing Method (Flow, pump, gas lift, etc.) | | | / | | | |
| | Length of Test | Tubing Pressure | | Casing Pressure | | Choke Size | | |
| | | | | | | CHOKE SIKE | `` | |
| | Actual Prod. During Test | Oll-Bbls. | | Water - Bbls. | | Con-162/2017 3 | | |
| - | | <u> </u> | | 1 012 DIS. | / | | | |
| | GAS WELL | | | | | | | |
| | Actual Prod. Test-MCF/D | Length of Test | | Bbls. Condensate/MM | CF | Gravity of Condennate | | |
| | 10,379 AOF Testing Method (pitot, back pr.) | 3 Hours | (shut-in) | -0- Casing Pressure (Sho | rt-in) | - ()- Choke Size | | |
| | Back Pressure | 52 | • | 661 | - | 3/4" | | |
| ۷I. | CERTIFICATE OF COMPLIANCE | | | OIL CONSERVATION COMMISSION | | | | |
| | I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given | | | APPROVED | | | | |
| | | | | By Original Signed by a T. Bandrick | | | | |
| | above in true and complete to the | best of my kno | wledge and belief. | BYBY | 12 325-4 - 3- | | | |
| | DD My is | | | TITLE | | | | |
| | | | | This form is to be filed in compliance with MULE 1104. If this is a request for allowable for a newly drilled or despense well, this form thust be accompanied by a tabulation of the deviation trate taken on the well in a cordance with MULE 111. | | | | |
| _ | | | | | | | | |
| | Division Production | | | | | | | |
| • | DIVISION Production (Ti | | All sections of this form must be filled out completely for allow able on new and recompleted wells. | | | | | |
| | 3:1- | 77 | | Fill out only | Sactiona I, II. | III, and VI for change, or other such change | sa of owner, | |
| | (De | (Date) | | | | he filed for each poo | | |
| | | | namelated watte | | | | | |