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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-110
Effective 1-1-65

I. Operator
Tenneco Oil Company
Address
P. O. Box 1714, Durango, Colorado
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
Gas well now starting to make fluid - condensate.

~~NOTE: This gas well has been producing since 1952; just now beginning to produce condensate. Request authority to be effective on date of initial delivery.~~
NOTE: This gas well has been producing since 1952; just now beginning to produce condensate. Request authority to be effective on date of initial delivery.

II. DESCRIPTION OF WELL AND LEASE

| | | | |
|--|----------------------|---|--|
| Lease Name Helen Jackson | Well No. 1 | Pool Name, including Formation Blanco Mesaverde | Kind of Lease State, Federal or Fee Federal |
| Location Unit Letter A ; 990 Feet From The North Line and 990 Feet From The East Line of Section 34 , Township 29N Range 9W , NMPM, San Juan 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"/> Rock Island Oil & Refining Company | Address (Give address to which approved copy of this form is to be sent) P. O. Box 328, Farmington, New Mexico | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Southern Union Gathering | Address (Give address to which approved copy of this form is to be sent) Fidelity Union Tower, Dallas, Texas | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit A | Sec. 34 | Twp. 29N | Rge. 9W | Is gas actually connected? Yes | When Since 1952 |

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 Restv. | Diff. Restv. |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | | P.B.T.D. | | |
| Pool | Name of Producing Formation | | Top Oil/Gas Pay | | | Tubing Depth | | |
| Perforations | | | | | | Depth Casing Shoe | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | | SACKS CEMENT | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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 | |
| Testing Method (pitot, back pr.) | Tubing Pressure | Casing Pressure | 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.

Original Signed By:
J. H. WATKINS

(Signature) **J. H. Watkins**

District Office Supervisor

(Title)

3-11-65

(Date)

OIL CONSERVATION COMMISSION

MAR 12 1965

APPROVED _____, 19 _____

Original Signed By
A. R. KENDRICK

BY **A. R. KENDRICK**
TITLE **PETROLEUM ENGINEER DIST. NO. 3**

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 Sections I, II, III, and VI only 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.