NO. UF COPIES RECEIVED					
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SANTA FE					
FILE					
U.S.G.S.					
LAND OFFICE					
TRANSPORTER	OIL				
INANSPONIER	GAS				
OPERATOR					
PRORATION OFFICE					
Operator					
Tenneco Oil Compar					
Address					
P. O. Bo					
Decreased No. Line	Charle	MARKE	has		

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110
Effective 1-1-65

	FILE		AND				
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	AS			
	LAND OFFICE			-			
	OIL						
	TRANSPORTER GAS						
	OPERATOR						
ı.	PRORATION OFFICE	L					
	•	pperditor					
	Tenneco Oil Company	<u> </u>					
	Address						
	P. O. Box 3249, En						
	Reason(s) for filing (Check proper box,		Other (Please explain)				
	New Well X	Change in Transporter of:	_				
	Recompletion	OII Dry Gas	s				
	Change in Ownership	Casinghead Gas Conden	sate 📗	İ			
	If change of ownership give name						
and address of previous owner							
Ħ.	DESCRIPTION OF WELL AND						
Lease Name		-					
	Eaton Com B	#1 Blanco Mesa	verde State, 7 dans	Federal 047020B			
	Location						
	Unit Letter P : 1040 Feet From The South Line and 790 Feet From The East						
	<u> </u>			1			
	Line of Section 25 Tov	viship 29N Range 1	lW , NMPM, San Ji	ian County			
	File of Section 70						
f 7 T	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s				
	Name of Authorized Transporter of Oil	Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)					
			Box 460, Hobbs, New Me	exico 88240			
	CONOCO Name of Authorized Transporter of Cas	singhead Gas or Dry Gas X	Address (Give address to which approved copy of this form is to be sent)				
	Name of Authorized Trunsporter of Cas	inginite data at any and a	Box 990, Farmington, 1				
	El Paso Natural Gas		Is gas actually connected? Whe				
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	is gas actually connected?				
	give location of tanks.	P 25 29N 11W	NO	ASAP			
	If this production is commingled wit	th that from any other lease or pool,	give commingling order number:				
IV	COMPLETION DATA						
•••		Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty. Diff. Resty.			
	Designate Type of Completic	on = (X)	x				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	8/14/80	10/14/80	4550'	4518'			
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth			
		Mesaverde	4016'	4518'			
	5562' gr.		<u> </u>	Depth Casing Shoe			
		1110ns 4016-28', 4032-36', 4039-46', 4092-93', 4107-08', 4243-44',					
	4253-55', 4300-01',	<u>4322-24', 4378-80', 4399</u>	-4400'				
			CEMENTING RECORD	CACAC CENENT			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	13-3/4"	36# 9 <b>-</b> 5/8 <b>"</b>	269'	200 sx			
	8-3/4"	23# 7"	4550'	235 sx (lst stage)			
				525 sx (2nd stage)			
		2-3/8"	4016'	1			
V.	TEST DATA AND REQUEST F	able for this de	pth or be for full 24 hours)				
	Oll. WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pumpage)	( re.)			
	Date Little Man On Lant 10 1 aura						
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Tubing Pressure	Casing Pressure	CHOLO ST.			
	Length of Test		1 13 1	201			
		Tour Bhis	Water-Bble. SEP 18	13M MCF			
	Actual Prod. During Test	Oil-Bbls.	1 SEP 30	LOM.			
			LACO LACON	Com			
	Actual Prod. During Test  SEP 10 COM.  OIL CON. COM.  DIST. 3						
GAS WELL				Today do and a second			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Cavity of Condensate			
	1388'	3 hrs.					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-is)	Casing Pressure (Shut-in)	Choke Size			
	Back Pressure	1165		3/4"			
		Back Pressure 1105					
VI.	1. CERTIFICATE OF COMPLIANCE			1 - 4004			
SEP 18				SEP 1, 8, 1981			
I hereby certify that the rules and regulations of the Oil Conservation							
	mmission have been complied with and that the information given ove is true and complete to the best of my knowledge and belief.  BY Original Signed by FRANK T. CHAVEZ		K I. CHAVEL				
TITLE			AND				
	\ . [ ] . II . !/		This form is to be filed in compliance with RULE 1104.				
	X. / / W// // a						
	LOV W // Man		If this is a request for allowed, this form must be accomps	inied by a tabulation of the deviation			
(Signature)			If this is a request for allowable for a newly sillow 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 multiply

Production Analyst

September 15, 1981

(Title)

(Date)