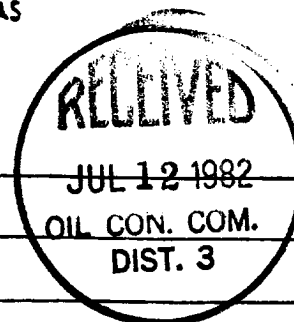


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TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-106
Supersedes Old C-104 and C-
Effective 1-1-81



Operator Tenneco Oil Company	
Address Box 3249, Englewood, Co. 80155	
Reason(s) for Filing (Check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐	Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐	Additional completion in the Chacra

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Florance	Well No. 126	Pool Name, Including Formation Ind. Chacra	Kind of Lease Federal State, Federal or Fee SF080000	Lease No.
Location Unit Letter <u>L</u> ☒ : <u>1300</u> Feet From The <u>South</u> Line and <u>1190</u> Feet From The <u>West</u>				
Line of Section 26	Township 29N	Range 9W	N.M.P.M. San Juan	County

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 is to be sent)					
Conoco	P.O. Box 460, Hobbs, N.M. 88240					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas	P.O. Box 990, Farmington, N.M., 87401					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 26	Twp. 29N	Range 9W	Is gas actually connected? No	When ASAP

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 Reservoir ☐	Diff. Reservoir ☒
Date Spudded 11/12/81	Date Compl. Ready to Prod. 7/7/82	Total Depth 6615'KB		P.B.T.D. 6613'KB					
Elevations (DF, RKB, RT, CR, etc.) 5626'GR	Name of Producing Formation Chacra	Top Oil/Gas Pay 3,046'KB		Tubing Depth 3,100'KB					
Perforations 3,046-54'KB, 3,080-90'KB, 3,152-62'KB				Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/2"		9-5/8" 36#		314'KB		250			
8-3/4"		7" 23#		3,450'KB		590			
6 1/2"		4 1/2" 10.5#		6615'KB		450			
		1 1/2"		3100'KB					

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 - MCF

GAS WELL

Actual Prod. Test - MCF/D 1018	Length of Test 3hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-In) 420 psi	Casing Pressure (Shut-In) 420 psi	Choke Size 3/4"

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.

Charles Wilson
(Signature)

Production Analyst

(Title)
July 8, 1982

(Date)

OIL CONSERVATION COMMISSION

12-17-82
APPROVED _____, 19____

BY Original Signed By CHARLES WILSON

TITLE DEPUTY OIL & GAS INSPECTOR, DIST. 423

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells 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 conditions.

Separate Forms C-106 must be filed for each pool in multi-layered wells.