

DISTRIBUTION	
SANTA FE	
FILE	
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-1
Effective 1-1-65

APJ 30-045-22152

Operator Tenneco Oil Company	
Address 720 So. Colorado Blvd., Denver, Colorado 80222	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE				*SF 078201
Lease Name Florance	Well No. 20A	Pool Name, including Formation Pictured Cliffs	Kind of Lease State, Federal or Fee Federal	Lease No. *
Location				
Unit Letter J ; 1510 Feet From The South Line and 2334 Feet From The East				
Line of Section 24 Township 30N Range 9W , NMPM, San Juan County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
Plateau, Inc.		Box 108, Farmington, New Mexico 87401		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Co.		Box 990, Farmington, New Mexico 87401		
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 24	Twp. 30N	Rge. 9W
				Is gas actually connected? Yes
				When 6/28/79

If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			X						X
Date Spudded 8/23/76	Date Compl. Ready to Prod. 5/30/79		Total Depth 4925'		P.B.T.D. 4875'				
Elevations (DF, RKB, RT, GR, etc.) 5820' GL	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 2544'		Tubing Depth 4843'				
Perforations 72 holes from 2544' to 2574'					Depth Casing Shoe				

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	9 5/8"	228'	200
8 3/4"	7"	2820'	350
6 1/8"	4 1/2" csg liner	2586' - 4992'	275
	2 3/8"	4843'	

VI. 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 14,244	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) back pressure	Tubing Pressure (shut-in) 660	Casing Pressure (shut-in) 666	Choke Size 3/4"

I. 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 above is true and complete to the best of my knowledge and belief.		APPROVED JUL 20 1979, 19	
Carley Watters (Signature) Administrative Supervisor (Title) 7/15/79 (Date)		BY Original Signed by A. E. Kendrick SUPERVISOR DISTRICT # 3 TITLE	
		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 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 multiple	