

NEW MEXICO OIL CONSERVATION COMMISSION
DISTRIBUTION
SANTA FE
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER OIL
GAS
OPERATOR
PROBATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE
AND

Form C-104

Supersedes Old C-104 and C-110

Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OCT 10 3 1965

I. COMPANY		
Tenneco Oil Company		
Address		
P.O. Box 1031, Midland, Texas		
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well ☐	Change in Transporter oil: ☐	Change name of lease from
Recompletion ☐	Oil ☐	Federal Ginsberg NM 0569
Change in Ownership ☒	Casinghead Gas ☐	Effective 10-1-65

If change of ownership give name and address of previous owner Leonard Oil Company, 10th Floor Security Life Bldg., Roswell, New Mexico

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
Ginsberg Federal	5	Lenglie Mattix	State, Federal or Fee Federal
Location			
Unit Letter D	660	Feet From The North	Line and 660
Line of Section 31		Township 25S	Range 38E
		NMPM	Lea
		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)
Texas New Mexico Pipeline		Box 1510 Midland, Texas
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		Box 1492 El Paso, Texas
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	D	31
	25S	38E
	yes	unknown

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 Rest'v.	Diff. Rest'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.S.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-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. 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 _____, IS

BY _____

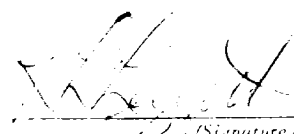
TITLE _____

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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter or other such change of condition. Say some Forms C-104 must be filed for each pool in multiple


R. L. Leggett
(Signature)
District Office Supervisor
(Title)
October 1, 1965
(Date)