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**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-
Effective 1-1-65

I. Operator:
Tenneco Oil Company

Address:
P.O. Box 3249 Englewood, Colorado 80155

Reason(s) for filing (Check proper box)

| | | | |
|---------------------|--------------------------|---------------------------|--------------------------|
| New Well | <input type="checkbox"/> | Change in Transporter of: | |
| Recompletion | <input type="checkbox"/> | Oil | <input type="checkbox"/> |
| Change in Ownership | <input type="checkbox"/> | Casinghead Gas | <input type="checkbox"/> |
| | | Dry Gas | <input type="checkbox"/> |
| | | Condensate | <input type="checkbox"/> |

Other (Please explain)

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

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|----------------|--|---|-----------|
| Lease Name Jicarilla B | Well No. 4E | Pool Name, including Formation Basin Dakota | Kind of Lease State, Federal or Fee Federal Contract#109 | Lease No. |
| Location Unit Letter <u>P</u> ; <u>940</u> Feet From The <u>South</u> Line and <u>880</u> Feet From The <u>East</u> | | | | |
| Line of Section <u>21</u> Township <u>26N</u> Range <u>2W 5W</u> , NMPM, Rio Arriba 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"/> | Address (Give address to which approved copy of this form is to be sent) |
| Conoco | Box 460, Hobbs, New Mexico 88240 |
| 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) |
| Northwest Pipeline | Box 1526 Salt Lake City, Utah 84111 |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. Is gas actually connected? When |
| | P 21 26N 2W NO ASAP |

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

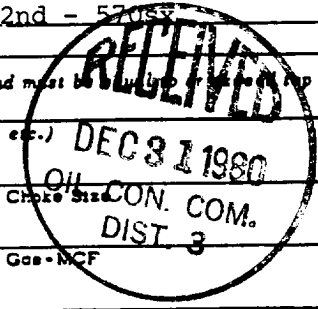
IV. COMPLETION DATA

| | | | | | | | | |
|--|---------------------------------------|--------------------------|-----------|-----------------------|--------------|-------------------|-------------|------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res' |
| | | X | X | | | | | |
| Date Spudded 10/21/80 | Date Compl. Ready to Prod. 12/5/80 | Total Depth 7490' | | P.B.T.D. 7461' | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 6536'gr | Name of Producing Formation Dakota | Top Oil/Gas Pay 7146' | | Tubing Depth 7144' | | | | |
| Perforations 7146'54', 7179-81', 7237-39', 7275-89', 7308-10', 7320-28', 7361-75', 7438-42' | | | | | | Depth Casing Shoe | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 12 1/4" | 9-5/8" 36# | | 296' | | 275sx | | | |
| 7-7/8" | 4 1/2 10.5 11.6# | | 7494' | | 1st - 570sx | | | |
| | 2-3/8" | | 7144' | | 2nd - 570sx | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be applicable 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 1170 | Length of Test 3 hrs | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) Back Pressure | Tubing Pressure (shut-in) 1360 PSI | Casing Pressure (shut-in) 1400 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.

Carly Stetson
(Signature)

Asst. Div. Adm. Mgr.

(Title)

December 18, 1980

(Date)

OIL CONSERVATION COMMISSION

JAN 9 1981

APPROVED _____, 19____

BY **Original Signed by FRANK T. CHAVEZ**

TITLE **SUPERVISOR DISTRICT # 3**

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 own well name or number, or transporter, or other such change of conditions.
Separate Forms C-104 must be filed for each pool in multi-completed wells.