NO. OF COPIES HEC	Elveo	ł	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
		T i	

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104
Supersedes Old C-104 and C-114
Effective 1-1-65

	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			SAS		
	LAND OFFICE			•		
	TRANSPORTER OIL					
	GAS OPERATOR					
_	PROPATION OFFICE					
8.	Operator					
	Tenneco Oil Company					
	Address					
	Box 3249, Englewood, CO 80155					
	Reason(s) for filing (Check proper box)		Other (Please explain)			
	New Well X	Change in Transporter of:				
	Recompletion	Otl Dry Go	ıs 📙			
	Change in Ownership	Casinghead Gas Conder	nsate			
	If the set of apparatis since name					
	If change of ownership give name and address of previous owner					
	r .		-			
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including F	ormation Kind of Leas	Fodoral Legse No.		
	Lease Name	1E Basin Dakota	1	Federal Lease No.		
	Schwerdtfeger A	IE Basin Bakota		3F-0/9319]		
		o South	ne and 990 Feet From	West		
	Unit Letter L : 175	O Feet From The South Lin	ne and 990 Feet From	The		
	Line of Section 36 Tow	mship 28N Range	9W , NMPM,	San Juan County		
	Line of Section 35 Tow	namp ZON Nunge				
***	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	ıs			
111.	Name of Authorized Transporter of Oil	or Condensate X	Address (Give address to which appro	ved copy of this form is to be sent)		
	Giant Refining		Box 256, Farmington, N	IM 87401		
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas X	Address (Give address to which appro			
	El Paso Natural Gas		Box 990, Farmington, N	IM 87401		
		Unit Sec. Twp. Rge.	Is gas actually connected? Wh			
	If well produces oil or liquids, give location of tanks.	L ! 36 28N 9W	No	ASAP		
	If this production is commingled wit	h that from any other lease or pool.	give commingling order number:			
	COMPLETION DATA					
• • •		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completio	1 . 1	; X ;	<u> </u>		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	10/12/82	11/22/82	6676' KB	6632 KB		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth		
	5906' GR	<u> Dakota</u>	6436' KB	6543' KB		
	Perforations		LVD	Depth Cdaing shoe		
	6436-40' KB, 6564-74' K	B, 6464-90' KB, 6600-14	KB			
			D CEMENTING RECORD	SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE	265' KB	260 CF		
	12-1/4"	9-5/8", 36# 7", 23#	2751' KB	541 CF		
	8-3/4"	4-1/2", 10.5#	2345~ 6676' KB	769 CF		
	6-1/4"	2-3/8"	6543' KB	100		
				and must be equal to or exceed top allow-		
V.	TEST DATA AND REQUEST FO	DR ALLOWABLE (1221 must be a shie for this do	epth or be for full 24 hours)	mass of equation of cutoff top accept		
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas I	ift, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas-MCF		
			<u> </u>			
	GAS WELL			Gravity of Condensate		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravityor Condensate		
	1481	3 hrs.	Casing Pressure (Shut-in)	Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	•	3/4"		
	Back Pressure	1650 psi	1655 psi			
VI.	CERTIFICATE OF COMPLIANCE	CE .	OIL CONSERV	ATION COMMISSION		
			12-17-82			
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.		Oisign Signed by	APPROVED 11 LC: 11 L. CHARLES CHICLEON			
		Original Signed by CHARLES OMOLSON				
		DEPLITY OIL & GAS INSPECTION, DIST. #3				
			TITLE			
			This form is to be filed in	This form is to be filed in compliance with RULE 1104.		
wentse war		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				
		stwe)	tests taken on the well in accordance with RULE			
	Production Analyst (Title)		Att sections of this form m	All sections of this form must be filled out completely for allow-		
	(Tit	ile)	able on new and recompleted W	able on new and recompleted wells. Fill out only Sections I. II. III, and VI for changes of owner,		
	December 7, 1982		Fill out only Sections I.	II, III, and VI for changes of owner, ree, or other such change of condition.		

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

(Date)