

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P.O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FEB 03 1986
OIL CONSERVATION DIVISION
DIST. 3

I. Operator Tenneco Oil Company	
Address P. O. Box 3249, Englewood, CO 80155	
Reason(s) for filing (Check proper box)	Other (Please explain)
☒ New Well ☐ Recompletion ☐ Change in Ownership	Change in Transporter of: ☐ Oil ☐ Casinghead Gas ☐ Dry Gas ☐ Condensate

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Storey C LS	Well No. 7A	Pool Name, including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee USA SF	Lease No. 077111
Location Unit Letter <u>0</u> : <u>1185</u> Feet From The <u>South</u> Line and <u>2205</u> Feet From The <u>East</u> Line of Section <u>27</u> Township <u>28N</u> Range <u>9W</u> NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Conoco Inc. Surface Transportation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 460, Hobbs, NM 88240	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4990, Farmington, NM 87499	
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 27
	Twp. 28N	Rge. 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 _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Ann Toller
(Signature)

Administrative Operations
(Title)

January 24, 1986
(Date)

OIL CONSERVATION DIVISION

APPROVED _____

Original Signed by FRANK T. CHAVEZ

BY _____

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 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 Section I, II, III, and VI for changes of owner, well name and or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion — (X)									
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res.	Diff. Res.		

Date Spudded	11-16-85	Date Compl. Ready to Prod.	1-15-86	Total Depth	5250' KB	P.B.T.D.	5093' KB
Elevations (D.F., R.K.B., R.T., G.R., etc.)	6215' GL	Name of Producing Formation	Mesaverde	Top Oil/Gas Pay	4378' KB	Tubing Depth	4847' KB
Perforations	2 JSPF 20', 40 holes					Depth Casing Shoe	5192' KB

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	9-5/8" csq	312' KB	160 SX, 189 CF
8-3/4"	7" csq	3517' KB	605 SX, 1014 CF
6-1/4"	4-1/2" Liner csq	3369-5192' KB	250 SX, 407 CF
--	2-3/8" Tbg	4847' KB	--

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	Length of Test	Tubing Pressure	Casing Pressure	Water - Bbls.	Gas - MCF
Actual Prod. During Test	Oil - Bbls.						

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
2224	3 hrs				720	730	3/4"
Back Pressure							

* 2 JSPF 43' 86 holes

4662-66'
4670-72'
4788-92'
4698-4700'
4708-21'
4726-28'
4732-40'
4883-87'