## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

		_	
NO. OF COPIES RECE	V€D		
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
IRANSPORIER	GAS		Г
OPERATOR			
PRORATION OFFICE			

## 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

PRORATION OFFIC	E	AI	JTHOR	IZATION TO	TRANS	PORT OIL	AND NATUR	RAL GAS		
1								נטן	EGE     SEP 06 1985	
Operator								IM I	- 6 6 1	
Tenneco O:	il Company	E & P WI	RMD_					44	_	
Address									SEP DE 100	<u>[U</u>
P. O. Box	3249, Eng	glewood, (	00 80	0155				<b>O</b> #	- 00 1985	5
Reason(s) for filing (	Check proper box)						Other (Please ex	plain)	CON	i) e
New Well	Cha	ange in Transporte	r of:						DIST	<i>'V</i>
Recompletion		] Oil		Dry (	Gas				-wi, 's	
Change in Own	ership	Casinghead Ga	s	Con	densate		Well Na	ame		
	<u> </u>									
If change of ownersh and address of previ		El Paso	Natu	ural Gas	, P.O.	Box 4	990, Farm	ington, NM	87499	
II. DESCRIPTIO	N OF WELL	AND LEASE								
Lease Name		V	Vell No.	Pool Name, In	cluding Form	ation		Kind of Lease State, Federal or Fee	USA	Lease No.
Gartner LS	3		3	Blanco	MV			State, redetar or rec	SF	080597
Location								<u> </u>		
Unit Letter	N	:990		Feet From Th	sS		Line and	1650	Feet From The	
Line of Section	33	Town	ship	30N		Range	8W	, NMPM,	San Juan	County
Name of Authorized Conoco Inc Name of Authorized Canoco Inc Name of Authorized El Paso Na	Fransporter of Oil   C. Surface  Transporter of Casin	or Condensate ) Transpor	tatio	on		P. (	D. Box 460 Give address to which D. Box 499	th approved copy of this  O, Hobbs, Note that approved copy of this  O, Farming	9 88240 form is to be sent)	99
		Unit	Sec.	Twp.	Rge.	Is gas acti	ually connected?	When		
If well produces oil o give location of tanks		į N	33	30N	8W		Yes	}		
If this production is co						r				
VI. CERTIFICAT	TE OF COMP	LIANCE				11	C	OIL CONSERVAT	TON DIVISION	
I hereby certify that the with and that the info	he rules and regula	tions of the Oil Cor					Sran	k J. Jan	SEP	0 619 <b>1985</b>
Seott	M=K	my				TITLE This fo	orm is to be filed in	compliance with RULE		RVISOR DISTRICT ## \$
Sr. Regulat	tory Analy	(Signature) st				If this is a request for allowable for a newly drilled or deepened well, this form must panied by a tabulation of the deviation tests taken on the well in accordance with RUL				nce with RULE 111.
	···	(Title)				11				ew and recompleted walls.
	Š		्ट्				t only Section I, II, II such change of cor		owner, well name and	or number, or transporter,
		(Date)				Separa	ite Forms C-104 mu	ust be filed for each poo	ol in multiply complete	d wells.

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## IV. COMPLETION DATA

GAS WELL

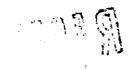
Actual Prod. During Test

seT to digne	Fressure	Casing Pressur		-	Choke Size		
Oste First New Oil Run To Tanks	Date of Test	Producing Metho	d (Flow, pump. gas lift, etc	lift, etc.)			
TEST DATA AND REQUES	T FOR ALLOWABLE OIL WEL	(Test must be at tot ed to figeb	er recovery of total volume all 24 hours)	volume of load	oil and must be equ	ot beeck to	) aldewolle q
HOFE SIZE	CASING & TUBING S		DEPTH SET		SACKS CEMENT		TV
	TUBING, CA	AND CEMENTIN	в весовр				
2noi1810h9 <sup>C</sup>					Depth Casing S	эоцо	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Yed SeD\IIO qoT			Tubing Depth		
bebbudg elsc	Date Compl. Ready to Prod.		· · · · · · · · · · · · · · · · · · ·		.G.T.8.9		<del></del>
Designate Type of Completi	oji weil (X) — no	i New Well	Morkover Deeper	Deepen	Plug Back	Узше Неѕ'v.	A'SOLL HIC

Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gasing Messure (Shut-in) Casing Pressure (Shut-in) Choke Size

Oil · Bbls.

Water · Bbls.



G98 - WCF