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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-110
Effective 1-1-65

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OCT 11 1965

O. C. C.
ARTESIA, OFFICE

I.

Tenneco Oil Company	
P.O. Box 1031, Midland, Texas	
Reason(s) for filing (Check proper box)	
New Well	Change in Transporter of:
Recompletion	Oil
Change in Ownership	Casinghead Gas
	Dry Gas
	Condensate
Other (Please explain) Change name of lease from Federal Hagerty NM 0610 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 Hagerty Federal	Well No. 9	Pool Name, including Formation Henshaw Grayburg West	Kind of Lease State, Federal or Fee Federal
Location			
Unit Letter 0 ; 660 Feet From The south Line and 1980 Feet From The east			
Line of Section 7 , Township 16S Range 30E , NMPM, Eddy County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate Continental Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) 220 Carper Building Artesia, New Mexico					
Name of Authorized Transporter of Casinghead Gas or Dry Gas Skelly Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1650 Tulsa, Oklahoma					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 7	Twp. 16S	Rge. 30E	Is gas actually connected? yes	When 7-1960

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'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.E.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		SAC 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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

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.

R. L. Leggett
District Office Supervisor
October 1, 1965

OIL CONSERVATION COMMISSION

OCT 11 1965

APPROVED _____, 19____
BY M. L. Armstrong
TITLE OIL AND GAS INSPECTOR

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.

Sections I, II, III, and VI only 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 completed wells.