

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-1-78REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED BY

JUN 04 1984

O. C. D.

ARTESIA, OFFICE

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OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

Operator  
Tenneco Oil Company ✓Address  
7990 IH 10 West, San Antonio, Texas 78230

Reason(s) for filing (Check proper box)

New Well ☐Recompletion ☒Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE R-795B 6/12/85

Lease Name State JL 36	Well No. 1	Pool Name/Including Formation Queen Grayburg So.	Kind of Lease State, Federal or Fee State	Lease No. E1819
Location Unit Letter 0 : 660 Feet From The South Line and 1980 Feet From The East Line of Section 36 Township 18S Range 29E , NMPM, Eddy County				

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 36	Twp. 18S	Rge. 29E	Is gas actually connected?	When

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

## COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back <input checked="" type="checkbox"/>	Same Res'v.	Diff. Res'v. <input checked="" type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod. 4-28-84		Total Depth 11,216		P.B.T.D. 2829'			
Elevations (D.E., RAB, RT, GR, etc.) 3430' GL	Name of Producing Formation Queen		Top Oil/Gas Pay 2464'		Tubing Depth 2376'			
Perforations 2464'-2480'					Depth Casing Shoe			

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	2 3/8	2376	

## 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)

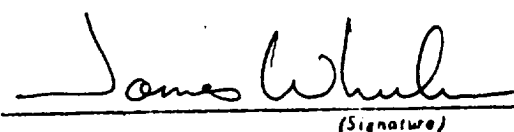
Date First New Oil Run To Tanks 4-28-84	Date of Test 5-15-84	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 40	Casing Pressure 0	Choke Size 3/4"
Actual Prod. During Test	Oil-Bbls. 80	Water-Bbls. 0	Gas-MCF TSTM

## GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

## 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 above is true and complete to the best of my knowledge and belief.



Production Analyst

24 May 1984

(Signature)

(Title)

(Date)

## OIL CONSERVATION DIVISION

JUN 04 1984

APPROVED \_\_\_\_\_, 19

BY \_\_\_\_\_

Supervisor District #

TITLE \_\_\_\_\_

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