BT/GE OF NEW MEXICO	·		Form C-104
I REY AND MINERALS DEPARTMENT		TION DIVISION	RECEIVED BY
0151 mills17 10H	P. O. BO	X 2008	
FARTAFE D	SANTA FE, NEV	V MEXICO 87501	SEP 28 1984
U B.U.B.	REQUEST FOR	RALLOWABLE	Ô. C. D.
ARTESIA, OFFICE			
PROBATUR OFFICE			
Tenneco Oil Company			
Address 7990 IH 10 West, San Antonio, Texas 78230			
Reason(s) for filing (Check proper box) Other (Please explain)			
New Well	Change in Transporter of: Cil Dry Ga		GHEAD GAS MUST NOT BE
Recompletion Change in Ownership	Cil Dry Ga Casinghead Gas Conder		AFTER 12-12-84
If change of ownership give name		UNLESS	AN EXCEPTION TO:
and address of previous owner			
DESCRIPTION OF WELL AND LEASE Kards Profest R-1958 6/12/85 Lease Name Well No. Pool Name, Including Cormation Kind of Lease Lease Lease No.			
State JL 36		(Und. Grayburg) State, Feder	ral or Fee State
Location J 188	0 TRACK	1980 Feet From	- East
Unit Letter Feet From The Line and Feet From The			
Line of Section 36 Township 185 Range 29E , NMPM, Eddy County			
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	S   Address (Give address to which appr	aved copy of this form is to be sentj
The Permian Corp. P.O. Box 1183, Houston, Texas 77001			
Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address to which appr	oved copy of this form is to be sent)
	Unit Sec. Twp. Rge.	Is gas actually connected?	hen
If well produces oil or liquids, give location of tanks.	J 36 18S 29E	!	
If this production is commingled with that from any other lease or pool, give commingling order number:			
Designate Type of Completic	on - (X) Gas well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
8/12/84	9/5/84	2904'	2857 ' Tubing Depth
Lievations (DF, RAB, RT, CR, etc.) 3438' GR	*lame of Producing Formation Oueen	Top Oil/Gas Pay 23591 2469	2782 '
Perforations 2469,2537',47',	48',49',50',2746',47',48	,84',85',86',87',88',	Depth Casing Shoe 2900
89',90',91',92',93',94',95' TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 4"	8 5/8"	309.44'	200 sxs
7 7/8"	5 3	2914.00'	700 sxs
<u>5 ½"</u>	2 3/8"	2182	
. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow- able for this depth or be for full 24 hours)			
OIL WELL   Date First New Oil Run To Tanks	able for this de	Producing Method (Flow, pump, gas	lift, etc.) Past 70-2
9/6/84	9/14/84	quitiq	10-19-84
Length of Test		Casing Pressure	Lift, etc.) Pest ID-2 Choke Size 10-19-84 - 20mg + BK
24 hrs. Actual Prod. During Test	Oil-Bble.	Water-Bbls.	Gas-MCF
	39	10	TSTM
GAS WELL			
Actual Fred. Tool-MCF/D	Length of Test	Bbls. Condensate/NUMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Presswe (Shut-in)	Cosing Pressure (Shut-in)	Choke Sixe
CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION OCT 12 1984	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given		Original Signed By	
above is true and complete to the best of my knowledge and belief.		BYLeslie A. Clements	
7		TITLE Supervisor District II	
marchall		This form is to be filed in compliance with RULE 1104.	
(Signature)		If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation	
Sr. Production Analyst		All sections of this form must be filled out completely for allow-	
(111/4) 9-26-84		able on new and recompleted weile.	
	14)	wall name or number, or transpo	int be filed for each pool in multiply
		Deparate Forme C-104 mc	• • •