

SALE PRICE
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER
OIL
GAS
OPERATOR
PRODUCTION OFFICE

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-1
Effective 1-1-65
RECEIVED
SEP 19 1980
O. C. D.
ARTESIA, OFFICE

Operator
TENNECO OIL COMPANY
Address
6800 Park Ten Blvd., Suite 200 N., San Antonio, Texas 78213
Reason(s) for filing (Check proper box)
New Well ☒
Recompletion ☐
Change in Ownership ☐
Designate
Change in Transporter of:
Oil ☐
Casinghead Gas ☐
Dry Gas ☐
Condensate ☒
Other (Please explain)

II. DESCRIPTION OF WELL AND LEASE
Lease Name
State HL-1
Well No.
1
Pool Name, Including Formation
Turkey Track Atoka
Kind of Lease
State, Federal or Fee State
Lease No.
B7717-7
Location
Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West
Line of Section 1 Township 19S Range 29E, NMFM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Condensate ☒
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 ☐ or Dry Gas ☒
Permian Natural Gas Co
Address (Give address to which approved copy of this form is to be sent)
Box 1384 Jal N. M. 88252
Box 2511 Houston Texas 77001
If well produces oil or liquids, give location of tanks.
Unit N Sec. 1 Twp. 19S Rge. 29E
Is gas actually connected? Yes When 8-19-80

IV. COMPLETION DATA
Designate Type of Completion - (X)
Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'tv. Unit. Res'tv.
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.
Elevations (DF, RKB, RT, CR, etc.) 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 SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lead 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 (pilot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) 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.
Mary Hall
(Signature)
PRODUCTION ANALYST
9-17-80
(Date)

OIL CONSERVATION COMMISSION
SEP 19 1980
APPROVED
W. A. Gressett
SUPERVISOR, DISTRICT II
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 district tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and re-completed wells.
Fill out only Sections I, II, III, and VI for changes of operator name or number, or transporter, or other such change of record.