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O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | |
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| SANTA FE | 7 |
| FILE | ✓ |
| U.S.S. | |
| LAND OFFICE | |
| TRANSPORTER | |
| OIL | 1 |
| GAS | 2 |
| OPERATOR | 1 |
| PRODUCTION OFFICE | |
| Operator | |

Tenneco Oil Company

Address
6800 Park Ten Blvd, San Antonio, Texas 78213

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)

Change Gas Transporter

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

| | | | | |
|----------------------------------|---------------|---|--|---------------------|
| Lease Name Ocotillo Hills Com | Well No. 1 | Pool Name, Including Formation Avalon Morrow | Kind of Lease State, Federal or Fee State | Lease No. K-4193 |
|----------------------------------|---------------|---|--|---------------------|

Location
Unit Letter F : 1650 Feet From The North Line and 1650 Feet From The West

Line of Section 21 Township 21S Range 26E , NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒

Navajo Crude Oil Purchasing Co.

Address (Give address to which approved copy of this form is to be sent)
P. O. Drawer 175, Artesia, N.M. 88210

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐

Ltano, Inc.
Southern Union Gathering Company

Address (Give address to which approved copy of this form is to be sent)
Box 1320, Hobbs, N.M.
First International Bldg., Dallas, TX 75270

If well produces oil or liquids,
give location of tanks.

| | | | |
|------|------|------|------|
| Unit | Sec. | Twp. | Rge. |
| F | 21 | 21S | 26E |

Is gas actually connected? Yes
When 12/16/74
12/14/75

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

COMPLETION DATA

Designate Type of Completion - (X)

| | | | |
|------------------------------------|-----------------------------|-----------------|-------------------|
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. |
| Elevations (DF, RKB, RT, GR, 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 |
|-----------|----------------------|-----------|--------------|
| | | | |
| | | | |
| | | | |
| | | | |

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.) | FD-3 - 1-15-82 CH. SAN to SUG |
| 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/MCF | Gravity of Condensate |
| Testing Method (pilot, 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.

Anta Gray
(Signature)

Production Analyst

(Title)

January 5, 1982

(Date)

OIL CONSERVATION DIVISION

JAN 12 1982

APPROVED

BY

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 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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.