

**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

G. E. Schmitt 12-11

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I. Operator
Tenneco Oil Company
Address
P.O. Box 3249, Englewood, CO 80155

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <i>Sr Hospah Unit</i>	Well No. 18	Pool Name, including Formation South Hospah Upper Sand	Kind of Lease State, Federal or Fee	Fed NM-081208	Lease No.
Location Unit Letter <u>G</u> ; <u>1475</u> Feet From The <u>North</u> Line and <u>3055</u> Feet From The <u>West</u>					
Line of Section <u>12</u> Township <u>17N</u> Range <u>9W</u> , NMPM, <u>McKinley</u> County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
<u>Ciniza Pipeline</u>	<u>P.O. Box 1887, Bloomfield, NM 87413</u>				
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)				
<u>None</u>					
If well produces oil or liquids, give location of tanks.	Unit <u>G</u>	Sec. <u>12</u>	Twp. <u>17N</u>	Rge. <u>9W</u>	Is gas actually connected? <u>Yes</u> When <u>10/24/81</u>

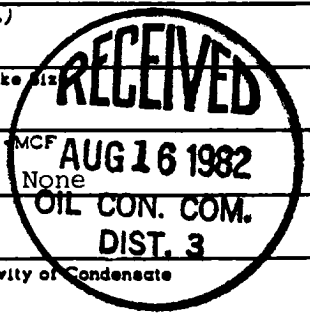
If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	<u>X</u>			<u>X</u>				
Date Spudded <u>11/13/67</u>	Date Compl. Ready to Prod. <u>11/8/81</u>	Total Depth <u>1750' KB</u>			P.B.T.D. <u>1606' KB</u>			
Elevations (DF, RKB, RT, GR, etc.) <u>6998' Gr.</u>	Name of Producing Formation <u>South Hospah Upper Sand</u>	Top Oil/Gas Pay <u>1554' KB</u>			Tubing Depth			
Perforations <u>1554-56'KB, 1558-60'KB, 1562-68'KB, 1572-76'KB, 1580-83'KB, 1586-96'KB</u>								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
<u>See C-104 dated 3/13/68 and revised C-104 1/13/69</u>								

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 <u>10/29/81</u>	Date of Test <u>11/9/81</u>	Producing Method (Flow, pump, gas lift, etc.) <u>Pumping</u>		
Length of Test <u>24 hrs.</u>	Tubing Pressure	Casing Pressure <u>0</u>	Choke Size	
Actual Prod. During Test	Oil-Bbls. <u>6</u>	Water-Bbls. <u>189</u>	Gas-MCF <u>None</u>	



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.

Denise Carlson
(Signature)
Production Analyst
(Title)
July 30, 1982
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 16 1982, 19____
BY Original Signed by FRANK T. CHAVEZ
TITLE SUPERVISOR DISTRICT # 3

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.