

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION 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-  
Effective 1-1-65

Operator Tenneco Oil Company	
Address P. O. Box 3249, Englewood, CO 80155	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla B	Well No. 6E	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Contract	Lease No. 109
Location Unit Letter <u>C</u> : <u>1120</u> Feet From The <u>North</u> Line and <u>1520</u> Feet From The <u>West</u> Line of Section <u>22</u> Township <u>26N</u> Range <u>5W</u> , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Conoco	Box 460, Hobbs, New Mexico 88240
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Northwest Pipeline	Box 1526, Salt Lake City, Utha 84111
If well produces oil or liquids, give location of tanks.	Unit <u>C</u> Sec. <u>22</u> Twp. <u>26N</u> Rge. <u>5W</u> Is gas actually connected? <u>No</u> When <u>ASAP</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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res't
			X	X					
Date Spudded 11/20/80	Date Com'l. Ready to Prod. 3/5/81	Total Depth 7550'		P.B.T.D. 7471'					
Elevations (DF, RKB, RT, GR, etc.) 6557' gr.	Name of Producing Formation Dakota	Top Oil/Gas Pay 7226'		Tubing Depth 7254'					
Perforations 7226-34', 7319-24', 7352-72', 7405-06', 7412-15', 7438-51'				Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
12-1/4"	9-5/8" 36#	267'		250 Sx					
7-7/8"	4-1/2" 10.5, 11.6#	7549'		1st: 500 Sx					
	2-3/8"			2nd: 865 Sx					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be original test 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 1313	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shot-in) 1565 PSI	Casing Pressure (Shot-in) 1563 PSI	Choke Size 3/4"

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.

Carley Hatten  
(Signature)  
Assistant Division Administrative Manager  
(Title)  
March 6, 1981  
(Date)

OIL CONSERVATION COMMISSION

MAR 16 1981

APPROVED \_\_\_\_\_, 19\_\_\_\_  
Original Signed by FRANK T. CHAVEZ  
BY \_\_\_\_\_  
SUPERVISOR DISTRICT # 3  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepen 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 all wells 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 conditions.  
Separate Forms C-104 must be filed for each pool in multiple completion wells.