## NO OF CAPIES PECLINED DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 SANTA FE Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE Effective 1-1-65 ١ AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS 0.L ILLEGIBLE TRANSPORTER -GAS CPERATOR PRORATION OFFICE Tenneco Oil Company P. O. Box 1714, Durango, Colorado Reason(s) for filing (Check proper box) Other (Please explain) Change in Transporter of: Effective First Delivery Recompletion Cil Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner \_\_\_\_ Dual Gallup - Dakota Gas Well II. DESCRIPTION OF WELL AND LEASE Lease No. Well No. Pool Name, Including Formation Kind of Lease Jicarilla "B" State, Federal or Fee Federal Basin Dakota Location 1650 North 990 Feet From The Line and Unit Letter 26 N 21 5 W Rio Arriba , NMPM. Line of Section Township Range County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorinea Transporter of Cil Address (Give address to which approved copy of this form is to be sent) or Condensate 🗓 P. O. Box 328, Farmington, New Mexico Address (Give address to which approved copy of this form is to be sent) Rock Island Oil and Refining Name of Authorized Transporter of Casinghead Gas or Dry Gas 🔀 P. O. Box 990, Farmington, New Mexico El Paso Natural Cas Company When Twp. Is gas actually connected? Sec. Unit If well produces oil or liquids, give location of tanks. 26N 5W No On Approval If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Plug Back | Same Res'v. Diff. Res'v. Gas Well New Well Oil Well Designate Type of Completion - (X) Χ X P.B.T.D. Date Spudded Date Compl. Ready to Prod. Total Depth 5/10/66 6/24/66 7535 7500 Top Oil/Gas Pay Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation 6<u>555 Gr.</u> 7204 6670 Dakota Depth Casing Shoe 7204-7446 7535 TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTH SET HOLE SIZE 12 7/4" 8 5/8" 333 150\_sx 1/2" 7 7/8<sup>#</sup> 5 7539 150 sx 1st stage 180 sx 2nd stage 430 sx 3rd stage (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) V. THET DATA AND REQUEST FOR ALLOWABLE OIL WELL ift, etc.) Producing Method Hlow Data First New Oil Run To Tanks Date of Test hoke Size Tubing Pressure Length of Test Oil - Bbls. Actual Prod. During Test

Testing Method (pitot, back pr.) Tubing Pressure AOF Back Pr. 498

GAS WELL

9108

Actual Prod. Test-MCF/D

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.

Length of Test

3 hrs.

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	20 John S	
Esrola (	. Nienolg(Signature)	
Senior I	Production_Clerk	
	(Title)	
11/29/60		
- /	(Date)	

OIL CONSERVATION COMMISSION

DEC 30 1966

Choke Size

3/4"

Gravity of Condensate

By Original Signed by A. R. Kendrick

Bbls. Condensate/MMCF

Casing Pressure

APPROVED.

TITLE PETROLEUM ENGINEER DIST NO. 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.