Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

REQUEST FOR ALLOWABLE AND AUTHORIZATION

P.O. Box 2088

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III 1000 Rio Brazus Rd., Aztec, NM 87410

Santa Fe, New Mexico 87504-2088

Operator Almoco Production Company 3003907424
Address 1670 Broadway, P. O. Box 800, Denver, Colorado 80201 Reason(s) for liting (Check proper box) New Well [] Change in Transporter of: Recompletion [] Oil [] Dry Gas [] Change in Operator [] Casinghead Gas [] Condensate [] If change of operator give name and address of previous operator Tenneco Oil E & P, 6162 S. Willow, Englewood, Colorado 80155 II. DESCRIPTION OF WELL AND LEASE Lease Name [Well No. Pool Name, Including Formation
Reason(s) for I ling (Check proper box) New Well Change in Transporter of: Recompletion Change in Operator Confidence of Operator Confidence Operator
New Well Change in Transporter of: Recompletion Oil Dry Gas Change in Operator New York
Recompletion [] Oil [] Dry Gas [] Change in Operator [X] Casinghead Gas [] Condensate [] If change of operator give name and address of previous operator Tenneco Oil E & P, 6162 S. Willow, Englewood, Colorado 80155 II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Lease No. Cold Table Oct Table Colorado Color
If change of operator give name and address of previous operator. Tenneco Oil E & P, 6162 S. Willow, Englewood, Colorado 80155 II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Lease No. Pool Name (Colorado) Lease No. Pool Name (Colorado)
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Lease Name Well No. Pool Name, Including Formation Lease No.
SAN JUAN 28-7 UNIT 46 \$LANCO (MESAVERDE) FEDERAL NM009717
Location
Unit Letter : Feet From The Line and Feet From The
Section 16 Township 28N Range 7W , NMPM, RIO ARRIBA Co.
HE DESIGNATION OF TRANSPORTED OF OH AND NATURAL CAS
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)
CONOCO P. O. BOX 1429, BLOOMFIELD, NM 87413
Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent) EL PASO NATURAL GAS COMPANY P. O. BOX 1492. EL PASO TX 79978
EL PASO NATURAL GAS COMPANY P. O. BOX 1492, EL PASO, TX 79978 If well produces oil or liquids, Unit Soc. Twp. Rge. Is gas actually connected? When?
give location of tanks.
If this production is commingled with that from any other lease or pool, give commingling order number:
IV. COMPLETION DATA
Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v Diff 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
1
TUBING, CASING AND CEMENTING RECORD
TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
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W. 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 Tank 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 MCD Length of Test Bbls. Condensate/MMCF Gravity of Condensate VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complete to the best of my knowledge and belief. Date Approved MAY 0.8 1999 Supplier
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INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.