STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.		<u>_</u>
LAND OFFICE		L.
	OIL	 _
TRANSPORTER	GAS	Ĺ
OPERATOR		Ĺ
PRORATION OFFICE		L

OIL CONSERVATION DIVISION P.O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

.s.G.s.		\vdash	_									
AND OFFICE	Lau	\vdash							4 D. F			
RANSPORTER	GAS	+ +	_			REQUE	ST FOR		ARLE			
PERATOR	1023	+-+					AN	D			CEIVE	m
ROBATION OFFICE		1 1		AUTHO	ORIZAT	ION TO	TRANSP	ORT OIL	AND NATUR	ALGED E	REINE	11 ()
KONATION CO.				,						IM		 U)
									-	n n	P 06 1985	
Operator Tenneco Oil	Соп	nar	14	WINNE						25	.P 00 1303	
I GUILIGGO OTT										A 11	VII 1400	
Address		.		CO	8015	5				OIL (CON. DIV.	•
P. O. Box 3	1249,	E	ag remood	, 60					Other (Please exp	n/ain1	DIST. 3	
Reason(s) for filing (Ch	heck pro	per b	ox)						Other (Frease CA)	p.2,		
			Change in Trans	sporter of:								
New Well			Oil	•		Dry Ga	ıs					
Recompletion			= -			Conde			Well Na			
Change in Owner	ship		Casinghe									
			c1 o	aso Na	tura	1 Gas.	P.O.	Box 49	90, Farmi	ington, NM	87499	
f change of ownership and address of previou	give na us owne	me r	E.I F	430 100								
and address of provide												
I. DESCRIPTION	I OF \	NEL	L AND LEA	SE						Kind of Lease	USA	Lease No.
Lease Name				Well N	o. Po	ol Name, Incl	luding Forma	ition		State, Federal or Fe		013860-6
Russell LS				3	3 ⊌	ndes	PC					
				L							1.1	
Location	M		890) -			S		1 to a made	1140	Feet From The	
Unit Letter	M		:		F	eet From The			Line and			
• • • • • • • • • • • • • • • • • • • •					9	:8N			8W	. NMPM	, San Juan	County
Line of Section	23			Township		OIN		Range		, (4(4))	1,	
Euro or Odolion												
III. DESIGNATIO	NI OE	TD	ANSPORTE	R OF OI	L AND	NATURA	L GAS				in to be cent)	
Name of Authorized Tr	ransport	er of C	or Conde	nsateX				Address (Give address to whi	ich approved copy of th	is form is to be sent	
Conoco Inc	Cii	∽f=	co Trans	sporta	tion			P. (D. Box 46	O, Hobbs, N	M 88240	
COUCCO THE	, su		Carles bood Con	- 0.00.0	ias X			Address (Give address to whi	ich approved copy of th	nis form is to be sent)	_
Name of Authorized To	ransport	erot (asingnead Gas	_ 0, 5, y 0				P.	O. Box 49	90, Farming	ton, NM 8749	9
El Paso Na	tura	T 6				1 Tues	TROS		tually connected?	When		
				····	Sec.	Twp.	Rge.	is gas ac	Yes	i i		
If well produces oil or	r liquids.		!	M	23	28N	8W	<u></u>	163			
give location of tanks	·				nool give	comminalina	order numbe	r				
If this production is cor	mmingle	d with	that from any of	ner lease or (pool, give	Commigning	2.30					
NOTE: Complete	to Par	ts II	/ and V on	reverse s	ide if i	necessary	/ .					
NOTE: Complet	ie rai		47.0									
								11		OIL CONSERV	ATION DIVISION	CD 0 C 40
VI. CERTIFICAT	TE OF	CO	MPLIANCE				an anmali-a	APPR	OVED-	-		Cr, 10 13
I hereby certify that th	he rules	and re	egulations of the	Oil Conserv	ation Div	ision have be	en complied		1	77		
with and that the info	ormation	give	n is true and cor	nplete to the	e best of I	my knowleag	e and bener	BY	Treat	1		
								11 5'		- Janes	-	iomnion 🚍 4
4			•					- II		ſ) Supervisor Di	SIKIUI 🖀 🚨 🔃

I hereby with and	r certify that the rules and regulations of the Oil Conservation Division have been complied d that the information given is true and complete to the best of my knowledge and belief.
ز	Sett M-Linney
	(Signature)
Sr.	Regulatory Analyst
	SEP 1 1985
	(Date)

APPRQ	OIL CONSERVATION DIVISION SEP, 0 6 198	15
BY -	En 170/	•
TITLE	SUPERVISOR DISTRICT 1 1	

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 walls. Fill out only Section I, II, III, and VI for changes of owner, well name and or number, or transporter, or other such change of condition.

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

Form C-104 Revised 10-01-78 Pormat 06-01-83

ATAG	NOIL	OMPLE	IV. C

		1			1		1
(Id vand house 6 men	(ni-tud2) Pressaure (Shut-in))	Casing Pressure ((ur-tn4)		Choke Size	
[esting Method (pilot, back pr.)							
	_		Bbls. Condensate	MMCF)	Gravity of Conder	ətsan
Actual Prod. Test - MCF/D	Length of Test		atesephac2 sld8	33111			
SAS WELL							
					- 		
	-				Ì		
162 Gunna ion i interna	Oil - Bbis.	İ	Water - Bbis.	T		Gas - MCF	
Actual Prod. During Test					į		
	0.0000 6		Casing Pressure			Choke Size	
Length of Test	Tubing Pressure	 	<u> </u>				
				u spf. iduad in a	(ຕາລົ້າທ]
Date First New Oil Run To Tanks	Date of Test			(Flow, pump, gas li			
V. TEST DATA AND REQUEST FO	A ALLOWABLE OIL WEL	רר ,	i est must be atter depth or be for full	recovery of total w	lio bsol to amulo	and must be equa	sift to or exceed top allowable for this
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		T					
		 				_	
		 					
		 	 				
					 		SACKS CEMENT
HOLE SIZE	CASING & TUBING	3ZIS !		DEPTH SET	L		ZIVE CENTERIA
3210 3 1011	I UBING, C	CASING, AND	CEMENTING	BECORD		<u> </u>	
]		
					i	Depth Casing S	
Pertorations							
	j					undag Burge	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pa			Tubing Depth	
Eleveltope (OE awa and adolescelt					ĺ	Ì	
	Date Compl. Ready to Prod.		Total Depth			.0.T.8.9	
Date Spudded	Tat of whood lomo? ets.		-	1		1	3374
Designate Type of Completion -	(x)	i	HOAA MOSSI	Morkover I	Deepen	Plug Back	Same Res v Diff. Res v
" I ==0 to cauT otenpise()	II9W IIO	Gas Well	New Well	Notion.			
VIVA NOUTE IMAGE IN							