## STATE OF NEW MEXICO **ENERGY AND MINERALS DEPARTMENT**

Tenneco Oil Company 5 6 P LINES

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Operator

## 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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS DE LE VE

Tenneco Oil C	Company <del>5 6</del>	<b>STANS</b>					111	1985	
Address	1	1 00 0	0.455		<u>-</u>			3 6 1985	
P. O. Box 324		d, CO 8	0155				C	DN. DIV.	
Reason(s) for filing (Check	proper box)				İ	Other (Please exp	olain) OIL	or 3	
New Well	Change in Tran	sporter of:					D	151.	
Recompletion	Oil		Dry (	3as					
Change in Ownership	Casinghe	ad Gas	Cond	iensate		Well Na	ame		
f change of ownership give nd address of previous ow	name E1	Paso Nat	ural Gas	, P.O.	Box 49	90, Farm	ington, NM (	37499	
I. DESCRIPTION OF	WELL AND LEA								
Lease Name		Well No.	Pool Name, In	cluding Forma	ation		Kind of Lease State, Federal or Fee	USA	Lease No.
Jones A LS		9	So. Bl	anco-P	C Ext.		State, 1 Ederal of 1 Cc	SF	078390
Location									•
Unit LetterC	:	90	Feet From The	ss		Line and	1840	Feet From The	
1	.4		28N			8W	. NMPM.	San Juan	County
Line of Section	· •	Township	20.0		Range		, NMPM,	Jan Juan	County
II. DESIGNATION O			ND NATUR	AL GAS	Address (Gi	re address to which	approved copy of this	form is to be sent)	
•		• •					,		
Conoco Inc. S		-					), Hobbs, NA h approved copy of this		
Name of Authorized Transpo	-	_ or Dry Gas _	X				,		
El Paso Natur	al Gas							on, NM 87499	
	1	nit Sec.	Twp.	Rge.	Is gas actua	ally connected?	When		
If well produces oil or liquids give location of tanks.	i,	0 14	28N	8M		Yes			
f this production is commingly	ed with that from any oth	per lease or pool (	rive commingling	order number	,				
NOTE: Complete Pa	•								
/I. CERTIFICATE OF	F COMPLIANCE				II	c	IL CONSERVATI	ON DEED D.	2 1005
hereby certify that the rules	and regulations of the	Oil Conservation	Division have be	en complied	APPROV	/ED	$\Delta$	JER DI	<u>5,18362</u>
with and that the informatio					BY _	Enal	JO		
	M= Kring (Signar)				TITLE		- awa	SUPERV	ISOR DISTRICT
Swoth ?	M=Krum				This for	m is to be filed in	compliance with RULE	1104	
	(Signa)	re)			11			d or deepened well, this f	orm must be accom
Sr. Regulatory	Analyst				panied by	a tabulation of the	deviation tests taken o	in the well in accordance	with RULE 111.
	SEP(Title)	<del>1 1985 -</del>			All secti	ons of this form mi	ust be filled out complet	ely for allowable on new ar	nd recompleted walls
					11	only Section I, II, III uch change of con-		owner, well name and or nu	umber, or transporter
	(Date)				ft.	=		in multiply completed we	ills.
					**		·		

Form C-104 Revised 10-01-78 Format 06-01-83 Page 2 Choke Size

tual Prod. Test - MCF/D	teaT to dignal	1		Bbls. Condens	sate/MMCF		Gravity of Cor	ateanabr		
YS METF										
teat Prod. During Test	Oil · Bbls.	<del></del> -		Water - Bbls.			Gas · MCF			
test to dign	Fressure	Fressure			Pressure			Choke Size		
te First New Oil Ilun Tanks	IseT to ets.			Producing Meth	od (Flow. pump, ga	s lift, etc.)				
TEST DATA AND REQUES	T FOR ALLOWAE	BLE OIL WE	ק <u>ר</u>	(Test must be a for	fter recovery of tota full 24 hours)	o beol to amulov i	e ed tsum bas li	quel to or exceed to	oi aldewolle qo	
HOLE SIZE	CAS	SING & TUBING	BZIS		T32 HT930			SACKS CEME	TN	
	<del></del>	TUBING, C	ASING, ANI	CEMENTIN	1G RECORD					
dorations							Depth Casing	Shoe		
evations (DF, RK.3, RT, GR, etc.)	ubord to emaN	Name of Producing Formation		Top Oil/Gas Pay			fubing Depth			
beboude sin	Date Compl. Ready to Prod.		Total Depth			.0.1.8.9				
esignate Type of Completio	(X) — noi	Oil Well	Gas Well	II9W weN i	Morkover	Deepen	Plug Back	Same Resv.	v.zeR. hiO	
COMPLETION DATA		Il Oil Well	lleW 262	IleW well	Workover	2909901	Your Pulle	.,,	u mu ;	

Tubing Presssure (Shut-in)

Testing Method (pilot, back pr.)

Casing Pressure (Shut-in)