NO. J COPIES MEC	l		
DISTRIBUTIO			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OF			

	SANTA FE				NEW MEXICO OIL CONSERVATION COMMISSION			Form C+104	_			
	FILE			•	REQUEST FOR ALLOWABLE					Supersedes Old C-104 and C- Effective 1-1-65		
1			AND									
	U.S.G.S.			AUI	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					45		
	LAND OFFICE	<del>r</del>	<b> </b>	!						•		
	TRANSPORTER	OIL	$\longrightarrow$	4								
		GAS										
	OPERATOR											
I.	PRORATION OFF	FICE									<del></del>	
	Tenneco Oil	Compa	anv									
		Compa			<del></del>		<del> </del>		·	<del></del>		
	P.O. Box 324	10 Fr	ים ן פאטט	y CU 8	R∩155							
								Other (Please	0.010.01	<del></del>	<del></del>	
	Reason(s) for filing (	(Check p	roper oux;		T.			i Omer is rease	(2p.d.n)			
	New Well	띔			e In Transpo	_						
	Recompletion	$\vdash$		O11		Dry Gas				•		
	Change in Ownership	<u> </u>		Casin	ghead Gas L	Conden	2016	<u> </u>				
	If change of owners	thin give	e name									
	and address of prev				<del></del>						<del></del>	
11.	DESCRIPTION O	F WEL	L AND I	LEASE.	Na Casi Na	- Including Fe	**************************************		Kind of Lease		Lease No	
	Lease Name				Well No. Pool Name, Including Formati				ĺ	or Fee Chata	078390	
	Price			[#4	Bas	Basin Dakota			State, Federal or Fee State		1 0/0390	
	Location	_						225		<b>5</b>		
	Unit Letter	4	. <u> </u>	Feet	From The	North_Lin	• and	905	Feet From T	he <u>East</u>		
				_							_	
	Line of Section	<u> 14</u>	Tow	mship 2	28N	Range	<u>8W</u>	, NMPM	. San Jua	n	County	
III.	DESIGNATION O	F TRA	NSPORT	ER OF C	IL AND N	ATURAL GA	S	(Compaddence	to which approv	ed copy of this form is	to be sent!	
	Name of Authorized	Transpo	rter of Oli	۰	or Condensate	• 🛆	1					
	Conoco			<del></del> -			P.O. Box 460, Hobbs, New Mexico 88240  Address (Give address to which approved copy of this form is to be sent)					
	Name of Authorized			inghead Ga	s or D	ory Gas 🔀	i _					
	El Paso Nati	ural (	<u>aas</u>				P.O. Box 990, Farmington, New Mexico 87401					
	If well produces oil	or liquid	s,		Sec. Tw	vp.   P.g.e. 28N   8W	1	ctually connect	ed? Whe			
	give location of tank	ks.		, A ,	14 ! '	ZON OW	No	· · · · · · · · · · · · · · · · · · ·		ASAP		
	If this production is	If this production is commingled with that from any other lease or pool, give commingling order number:										
IV.	COMPLETION D											
			latio	- (Y)	Oil Well	Gas Well	New Wel	1 Workover	Deepen	Plug Back Same R	es'v. Diff. Res'	
	Designate Ty	pe of C	ompietio	n – (A)	_1	<u> ; X</u>	<u> </u>			!	<u></u>	
	Date Spudded			Date Com	pl. Ready to		Total De			P.B.T.D.		
	9/1/80				10/8/80			7423'		7380'		
	Elevations (DF, RKB, RT, GR, etc., Name			Name of P	ame of Producing Formation		Tep Oil/Gas Pay			Tubing Depth		
	6293 gr.				Dakota		7144'					
	Perforations									Depth Casing Shoe		
	7144-52', 7240-43', 7317-20', 7328-30				)', 7340-42	0-42', 7352-56'		7423'				
	TUBING, CASING, AND						CEMENTING RECORD		<del></del>			
	HOLE			CAS	ING & TUB		ļ	DEPTH S	ET	SACKS CE	MENT	
		1/4"					<u> </u>	292'		230 sx		
		3/4"			7"_	23#	<u> </u>	3600'		700 sx		
	6-	1/4"		4-1,	/2"11.	6# 10.5#	+	7330'		183 sx		
							<u>i</u>			<u> </u>		
V.	TEST DATA AN	D REQ	UEST FO	OR ALLO	WABLE	(Test must be a	feer recovi	ery of total volu	ime of load oil	and must be equal to o	rexceed top alic	
• •	OIL WELL					able for this de	punt or ou	, o. , peer 24	u, pump, gas lij	A		
	Date First New Oil	Run To	Tanks	Date of T	est		Producti	ng Method (Fio	v, pump, gas ii)		EAN.	
						Casing Pressure			Choke Size			
	Length of Test			Tubing Pressure		Cosing Pressure			15			
						1			Ga. MCF			
	Actual Prod. During Test		Oil-Bbis.		Water-Bbis.			VOIL CON. COM.				
	UST 3											
	GAS WELL									Gravity of Controlled	<u>./</u>	
	Actual Prod. Test-	MCF/D		Length of			Bble. C	ondensate/MM0	F	Creatty of Condense	110	
	Q=1985			3	3 hrs Tubing Pressure (Shut-in)		<u> </u>			1		
	Testing Method (pitot, back pr.)			Tubing Pr				Casing Pressure (Shut-in)		Chore Size		
	Back Pressu	re		22	50	<del></del> -	<u> </u>	2275		3/4"	<del></del>	
VI	CERTIFICATE OF COMPLIANCE						OIL		TION COMMISSI	ON		
* 2.							APPROVED FRANK T. THAVEZ. 19  BY SUPERVISOR DISTRICT # 1					
	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.				11							
					11							
					BY-							
	<u> </u>					TITL	.E	MEENVIOUR DIS	Table of a			
	//	4	_/.	1 1			il · · · ·			compliance with RU	LE 1104.	
	/ 1/ /		7/2	7/			11 -	This form is t	o be liled in	compilance with RU	illed or deapen	
	- Mal	Will Mill King				17	If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviati					
				atwe)	_		testa	tests taken on the well in accordance with Ruce '''				
	Assistant Division Administrative Manager							All sections o	f this form my	at be filled out com	plately for allo	
	November 5	(Title)						on new and r	coompleted w	elis. Till and VI for C		

(Date)

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

Separate Forms C-104 must be filed for each pool in multipage.