DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 SANTA FE Supersedes Old C-104 and C-116 Effective 1-1-65 REQUEST FOR ALLOWABLE FILE AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE TRANSPORTER GAS OPERATOR PRORATION OFFICE Tenneco Oil Company P.O. Box 3249, Englewood, Colorado 80155
Reason(s) for filing (Check proper box) (303) 740-2584 Other (Please explain) New Well Dry Gas Recompletion 011 Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner \_\_\_\_ **II. DESCRIPTION OF WELL AND LEASE** ool Name, Including Formation Lease No. State, Federal or Fee USA NM 03380 Florance 66E Basin Dakota Location 980 \_ Feet From The \_\_\_\_N\_\_\_ \_\_\_Line and <u>1760</u> Feet From The Township 27N 8W NMPM, San Juan **X**8 Range Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
| Name of Authorized Transporter of Oil | or Condensate | or Condensate | Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil Box 108, Farmington, NM 87401
Address (Give address to which approved copy of this form is to be sent) Plateau, Inc.
Name of Authorized Transporter of Casinghead Gas P.O. Box 1492, E El Paso, TX 79978 El Paso Natural Gas Company Twp. If well produces oil or liquids, give location of tanks. ; B 28 27N 8W **ASAP** no If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Gas Well Workever Plug Back Oil Well Designate Type of Completion - (X) Χ χ Total Depth Date Compl. Ready to Prod. 7463' KB 09/14/83 7470' KB 06/21/83 Top Cil/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc., 7247' KB 7276' KB 6800' KB Dakota Depth Casing Shoe Perforations 7276-98' KB, 7270-74' KB, 7382-90' KB, 7409-14' KB TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 240 cf 12 1/4" 318" KB 9 5/8" 8 3/4" 3450' KB 870 cf 3257-7470' KB 7247' KB 1/2" 1/16" 825 cf 1/4" (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. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Size Casing Pressure Length of Test Tubing Pressure Water - Bbls. Gge - MCF Oil - Bble. Actual Prod. During Test W.V. **GAS WELL** Gravity of Condensate Length of Test Bbls. Condensate/MMCF Actual Prod. Test-MCF/D 886 hrs Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) 3/4" 1445 psi 1420 psi back pressure OIL CONSERVATION COMMISSION 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.

(Signature) Production Analyst (Title) 30 8:

(Date)

APPROVED Original Signed by FRACK T. CHAVEZ SUPERVISOR DISTINCT # 3 TITLE

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