

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRORATION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Follow-up to Approved
C-104 dated 10/5/84

Operator Tenneco Oil Company	
Address P.O. Box 3249, Englewood, CO 80155	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Connect Gathering Line (Well was completed 9/27/84)
Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Price	Well No. 1E	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee State	Lease No. \$F-078390
Location				
Unit Letter D : 980 Feet From The North Line and 1080 Feet From The West				
Line of Section 13 Township 28N Range 8W NMPM San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS


Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Conoco Ground Transportation	P.O. Box 460, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co.	P.O. Box 4990, Farmington, NM 87401
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
D 13 28N 8W	Yes 10/28/87

If this production is commingled with that from any other lease or pool, give commingling order number _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.



Michael D. Gammon
Sr. Administrative Analyst

10/29/87

(Date)

OIL CONSERVATION DIVISION NOV 02 1987

APPROVED _____

BY **Original Signed by FRANK E. CHAVEZ**

TITLE **SUPERVISOR DISTRICT**

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 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.

IV. COMPLETION DATA

Designate Type of Completion — (X)		<input checked="" type="checkbox"/> Oil Well	<input checked="" type="checkbox"/> Gas Well	<input type="checkbox"/> New Well	<input type="checkbox"/> Workover	<input type="checkbox"/> Deepen	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Same Res.v.	<input type="checkbox"/> Diff. Res.v.
------------------------------------	--	--	--	-----------------------------------	-----------------------------------	---------------------------------	------------------------------------	--------------------------------------	---------------------------------------

Date Spudded	8/17/84	Date Compl. Ready to Prod.	9/27/84	Total Depth	7497'	P.B.T.D.	7482'
Elevations (D.F., RKB, RT, GR, etc.)	6406' GR	Name of Producing Formation	Basin Dakota	Top Oil/Gas Pay		Tubing Depth	7367'
Perforations	7251' - 7264'		7445' - 7448'	46 Holes	2 JSPF	Depth Casing Shoe	

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	12 1/2"	CASING & TUBING SIZE	9 5/8"	314' KB	3592' KB	See Below
	8 3/4"		7"	314' KB	3592' KB	
			4 1/2" Liner	3413 - 7497' KB	7367' KB	
			2 3/8" Tubing			

V. 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 Tanks		Date of Test		Producing Method (Flow, pump, gas lift, etc.)	
Length of Test		Tubing Pressure		Casing Pressure	
Actual Prod. During Test		Oil - Bbls.		Water - Bbls.	
				Gas - MCF	

GAS WELL

Actual Prod. Test - MCF/D		Length of Test	3 Hours	Bbls. Condensate/MMCF		Gravity of Condensate	
1277'							
Testing Method (pilot, back pr.)		Tubing Pressure (Shut-in)	1760 psi	Casing Pressure (Shut-in)	1775	Choke Size	3/4"
Back Pressure							

SACKS CEMENT

247 Ft³ B + Additives
786 Ft³ Form Tailed w/140 Ft³
CLB 113 Ft³ CIRC to Surface
TOC = Surface