

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

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MAR 14 1986
OIL CON. DIV.
DIST. 3

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Tenneco Oil Company	
Address P. O. Box 3249, Englewood, CO 80155	
Reason(s) for filling (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	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 Florance LS	Well No. 4A	Pool Name, including Formation Otero Chacra	Kind of Lease State, Federal or Fee USA NM	Lease No. 03380
Location				
Unit Letter D	: 1230	Feet From The North	Line and 865	Feet From The West
Line of Section 18	Township 27N	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, Inc. Surface Transportation	P. O. Box 460, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas	P. O. Box 4990, Farmington, NM 88499
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit D Sec. 18 Twp. 27N Rge. 8W	No ASAP

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.

Ann Jolliver
(Signature)
Administrative Operations
(Title)
March 10, 1986
(Date)

OIL CONSERVATION DIVISION
APPROVED APR 22 1986
BY Original Signed by FRANK T. CHAVEZ
TITLE SUPERVISOR DISTRICT 3

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)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Res.v
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Date Spudded	1/14/86	Date Compl. Ready to Prod.	3/6/86	Total Depth	4736' KB	P.B.T.D.	4729' KB	Tubing Depth	3395' KB	Depth Casing Shoe	4735' KB
Elevations (D.F., AKB, RT, GR, etc.)	6058' GL	Name of Producing Formation	Chacra	Top Oil/Gas Pay	3055' KB						
Perforations	See Below	TUBING, CASING, AND CEMENTING RECORD									

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	9-5/8" csq	299' KB	250SX (292CF)
8-3/4"	7" csq	3564' KB	440SX (692CF)
6-1/4"	4-1/2" inner csq	4735' KB	300SX (451CF)
---	1-1/4" tbq	3193' KB	---

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	Choke Size	Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL										
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	1721 mcf/d	3 hrs					
Testing Method (Pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	Back Pressure	730 psi	730 psi	3/4			

Perforations

2 JSPF, 24' 48 holes
3055-58'
3082-86'
3202-06'
3210-18'
3220-25' KB

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Amr Jolliver
(Signature)

Administrative Operations
(Title)

March 10, 1986
(Date)

OIL CONSERVATION DIVISION

APPROVED _____
BY _____ Original Signed by FRANK T. CHAVEZ
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