

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED  
MAR 17 1986  
OIL CON. DIV.  
DIST. 3

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

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	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 Schwerdtfeger A LS	Well No. 9A	Pool Name, including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee USA SF	Lease No. 079319
Location				
Unit Letter I	: 1320	Feet From The South	Line and 520	Feet From The East
Line of Section 31	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 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 87499
If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   Rge.   Is gas actually connected?   When
	I   31   28N   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

March 13, 1986

(Date)

OIL CONSERVATION DIVISION  
MAR 25 1986

APPROVED \_\_\_\_\_  
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
	X	X			

Date Spudded	1/15/86	Date Compl. Ready to Prod.	3/11/86	Total Depth	5682' KB	P.B.T.D.	5560' KB
Elevations (D.F., RKB, RT, GR, etc.)	6718' GL	Name of Producing Formation	Mesaverde	Top Oil/Gas Pay	5186' KB	Tubing Depth	5405' KB
Perforations	5186-90, 5202-12, 5216-18, 5224-34 w/1 JSPP; 5285-90, 5299-301, 5310-12, 5364-68, 5374-77, 5437-40 w/2 JSPP; 45', 70 holes	TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	12-1/4"	9-5/8" csg	292' KB	220SX (260CF)
				8-3/4"	7" csg	3302' KB	575SX (992CF)
				6-1/4"	4-1/2" inner csg	3112' KB-5677' KB	310SX (471CF)
				--	2-3/8" tbq	5405' 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	Gas - MCF
Actual Prod. During Test	Oil - Bbls	Water - Bbls					

# GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	2959 mcf/d	3 hrs		
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	Back pressure	660 psi	690 psi	