STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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SANTA FE

FILE

U.S.G.S.

LAND OFFICE

TRANSPORTER

OIL

GAS

OPERATOR

PRORATION OFFICE

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

REQUEST FOR ALLOWABLE

OPERATOR				Α	ND			
PRORATION OFFICE	AUTH	HORIZA	OT NOITA	TRANS	PORT OIL AND NATU	RALPASEDEI	MPG	ŧ
1.						DEGEL	VEID	
Tenneco Oil Company	S)					نا ہے۔	ĺ
Address						SEP 06 19	185	
P. O. Box 3249, Englew	ood, CO	801	55 	_		OIL CON.	DIV	
Reason(s) for filing (Check proper box)					Other (Please e)			
New Well Change in	Transporter of:					DIST. 3	}	
Recompletion Oil			Dry G	as				
Change in Ownership Casi	nghead Gas		Cond	ensate	Well N	ame		
If change of ownership give name and address of previous owner	l Paso M	latur	al Gas	P.O.	Box 4990, Farm	ington, NM 87499		
II. DESCRIPTION OF WELL AND I	EASE							
Lease Name	Well	_	ool Name, Inc		ation	Kind of Lease USA State, Federal or Fee	4	Lease No.
McCulley LS		3 1	Blanco-	-MV		0.0.0, 7.000.0.	M	04208
Location	1051			•		1000		
Unit Letter :	1951	F	Feet From The	<u> </u>	Line and	1020 Feet From	The	
Line of Section 24	Township	:	28N		Range 9W	, _{NMPM.} San J	Juan	County
III. DESIGNATION OF TRANSPOR	TER OF O	II AND	NATURA	I GAS				
Name of Authorized Transporter of Oil = or Co			11711011	12 07 10	Address (Give address to which	ch approved copy of this form is to	be sent)	
Conoco Inc. Surface Tra	-				P. O. Box 460	0, Hobbs, <mark>NM 882</mark> 4	10	
Name of Authorized Transporter of Casinghead G	as or Dry (Gas 💢	-		Address (Give address to which	ch approved copy of this form is to	be sent)	
El Paso Natural Gas						90, Farmington, N	M 87499	
If well produces oil or liquids,	ļ 1	Sec.	Twp.	Rge	Is gas actually connected?	When		
give location of tanks.		24	28N	9W	Yes			
If this production is commingled with that from an	y other lease or	pool, give	commingling	order numbe				
NOTE: Complete Parts IV and V of	n reverse s	side if r	necessary	<i>'</i> .				
VI. CERTIFICATE OF COMPLIANCE	CE				31	DIL CONSERVATION DIV	VISION	0 6 1006
I hereby certify that the rules and regulations of with and that the information given is true and					APPROVED		-SEP	138:
with and that the information given is tide and	complete to the	e Dest Of I	ny knowledge	and benen.	BY Soul			
					3)		C1117 11111111	
Stat M.Km					TITLE		SOP EKA120H	DISTRICT # 3
					This form is to be filed in	compliance with RULE 1104.		
1-9	nasare)					owable for a newly drilled or deep		
Sr. Regulatory Analyst					II .	e deviation tests taken on the well		
	rtie)				[]	nust be filled out completely for allo II, and VI for changes of owner, wel		
SF	:P 1 1	1985			or other such change of cor		ume and or nun	ibbs, or transporter,

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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esting Method (pilot, back pr.)	Jahra Pressaue (Shu	(ni-tud∂) en	Casing Pressu	(ni-turik) e		Choke Size		
ctual Prod. Test - MCF/D	Length of Test		Bbls. Condens.	HOMM/est		Gravity of Cond	ensate	
AS WELL								
ctual Prod. During Test	Oil - Bbls.	· · · · · · · · · · · · · · · · · · ·	Water - Bbls.			Gas - MCF		
rest to digne	esusesing priedu T			6		Choke Size		
ate First New Oil Run To Tanks	Date of Test		Producing Metho	o (Flow, pump. ga	(.ote, etc.)			
TEST DATA AND REQUES	FOR ALLOWABLE	BLE OIL WELL	he ed taum taeT) I not ed no figeb		o bsol to smulov i	upa ad 12um bne lii	ot beeck to	t not sidewolie q
HOLE SIZE		ING & TUBING SIZE	DEPTH SET			3	SACKS CEMEN	
	JT	TUBING, CASING,	D CEMENTIN	а весовр				
enorations						Depth Casing S	-роң	
levations (DF, AKB, AT, GA, etc.)	Name of Producing Fo	cing Formation	Top Oil/Gas Pa	Á		Tubing Depth		
ate Spudded	Date Compl. Ready to	eady to Prod.	rotal Depth			.0.1.8.9		
Designate Type of Completio	(X) — u	Oil Well Gas Well	llew well	 - Workover	i Deepen	l l bing Back	Vame ResV	v'.zeA. hid i
COMPLETION DATA							1	