

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I. Operator Tenneco Oil Company

Address P. O. Box 1714, Durango, Colorado

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐ Request for Allowable - Dakota gas and condensate

Recompletion ☒ Casinghead Gas ☐ Condensate ☐

Change in Ownership ☐

If change of ownership give name and address of previous owner Effective on first delivery

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Florance</u>	Well No. <u>31</u>	Pool Name, Including Formation <u>Basin Dakota</u>	Kind of Lease State, Federal or Fee <u>Federal</u>
Location Unit Letter <u>A</u> ; <u>890</u> Feet From The <u>North</u> Line and <u>890</u> Feet From The <u>East</u> Line			
Line of Section <u>12</u> , Township <u>29N</u> Range <u>8W</u> , NMPM, <u>San Juan</u> 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"/> <u>Plateau</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 108, Farmington, New Mexico</u>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <u>Southern Union Gas</u>	Address (Give address to which approved copy of this form is to be sent) <u>208 Apache, Farmington, New Mexico</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>A</u>	Sec. <u>12</u>
	Twp. <u>29N</u>	Rge. <u>8W</u>
	Is gas actually connected? <u>No</u> When <u>Approximately 8-1-65</u>	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<u>X</u>			<u>X</u>			<u>X</u>
Date Spudded <u>11-10-64</u>	Date Compl. Ready to Prod. <u>12-3-64</u>		Total Depth <u>7555 MD</u>		P.B.T.D. <u>7538 MD</u>			
Pool <u>Dakota</u>	Name of Producing Formation <u>Basin Dakota</u>		Top Oil/Gas Pay <u>7327</u>		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>6-1/4</u>	<u>4-1/2</u>		<u>7555</u>		<u>1st stage 100 sacks</u>			
	<u>2-3/8</u>		<u>7275</u>		<u>2nd stage 175 sacks</u>			
					<u>3rd stage 270 sacks</u>			

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 January 8, 1965 (Tested)

Actual Prod. Test-MCF/D <u>1985 AOF</u>	Length of Test <u>3 hours</u>	Bbls. Condensate/MMCF <u>0</u>	Gravity of Condensate <u>DIST. 3</u>
Testing Method (pitot, back pr.) <u>Back Pressure</u>	Tubing Pressure <u>Flow 153 psi</u>	Casing Pressure <u>Dual-Not applicable</u>	Choke Size <u>3/4"</u>

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.

Original Signed By
HAROLD C. NICHOLS H. C. Nichols
(Signature)

Sr. Production Clerk
(Title)

August 2, 1965
(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 17 1965, 19

BY Original Signed Emery C. Arnold

TITLE Supervisor Dist. # 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 Sections I, II, III, and VI only 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 completed wells.