STATE OF NEW MEXICO **ENERGY AND MINERALS DEPARTMENT**

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OPERATOR		
PRORATION OFFICE		

OIL CONSERVATION DIVISION P O BOX 2088

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SANTA FE		LI			P.O. B0	JX 2088				
FILE				SAN	TA FE, NEV	V MEXICO 875	01			
U.S.G.S.										
LAND OFFICE	OIL	 								
TRANSPORTER	GAS	- -	P.O. BOX 2088 SANTA FE, NEW MEXICO REQUEST FOR ALLOW AND AUTHORIZATION TO TRANSPORT OIL y E & P WRMD glewood, CO 80155					A		
OPERATOR AND						ND		[U] B	A	
PRORATION OFFICE			AUTHO	RIZATION T	O TRANSF	PORT OIL AN	D NATU	JRAL GART	Pa	
								V U		
Operator								00	- 4 0 7	F A
Tenneco Oil	Com	pany E-	& P WRMD					OEP	Ω σ	· //
									36 /905	
P. O. Box 3	249,	Englew	ood, CO	80155				CO,	V ~	W
Reason(s) for filing (Ch	eck prop	er box)				Oth	er (Please e	explain)	2011	
New Well		Change in	Transporter of:						7.0	
Recompletion		Oil		Dry	Gas					
rwon .			inghead Gas	(A)	ndensate	l	Well N	lame		
Change in Owners	inip	Cas	ingneau Gas	<u> </u>	ndensate	1				
If change of ownership and address of previous	s owner			tural Gas	s, P.O.	Box 4990	, Farıı	nington, NM 87	499	
Lease Name			Well No	Pool Name,	Including Forma	ation		Kind of Lease	USA	Lease No.
Ludwick LS			14	Aztec-	-PC			State, Federal or Fee	SF	078194
Location	-									
Location	ы		1650		N			992	Ε	
Unit Letter	Н	:_	1030	Feet From T	he	L	ne and	Fee	et From The	
								_		
Line of Section	6		Township	29N		Range	10W	, _{NMPM,} S	an Juan	County
Name of Authorized Tra Conoco Inc. Name of Authorized Tra Name of Authorized Tra El Paso Nat	Sur nsporter	of Oil □ or C face Tr of Casinghead	ondensate X ansportat	ion	RAL GAS	P. O. I	Box 46	ich approved copy of this form O, Hobbs, NM nich approved copy of this form O90, Farmingto	88240 m is to be sent)	99
EI PASU NAC	urat	<u>.</u>		77	10	Is gas actually c		When	77, 1811 077	77
If well produces oil or lie	auide		Unit Sec	! '	Rge.			! When		
give location of tanks.	quius,		i H	6 29N	10W	Ye	38			
If this production is com	ningled w	ith that from a	ny other lease or po	ol give comminglin	a order number	,				
NOTE: Complete										
VI. CERTIFICATE								OIL CONSERVATIO	N DIVISIONS	EP 06 198
I hereby certify that the with and that the inform						BY	5	rank J. Jan	*/_	, 19
Λ		^/	•						0	-
//_/	~^	15//				TITLE			301	ERVISOR DISTRICT
Litt	-91	/2Km	us			This form in	to he filed i	in compliance with RULE 110	14	
		(Sid	prature)			H				his form must be accom-
Sixt Many (Signature) Sr. Regulatory Analyst					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 walls.					
		(Title)					, III, and VI for changes of ow		•
		SEF	1 1985			or other such of			,	
		027	Date)			Sanarata Ea	me C-104 n	nust he filed for each pool in	multiply complete	d wells

Form C-104 Revised 10-01-78 Format 06-01-83 Page 2 Choke Size

Gravity of Condensate	(e)/MMCF	Bbls. Condensa	Length of Test			ctual Prod. Test - MCF/D		
'S MELL								
Gas - MCF		Water - Bbls.	Oil - Bbls.			Actual Prod. During Test		
Cłoke Size	Tubing Pressure Casing Pressure Choke Size			Pressure	tesT to ritigned			
Producing Method (Flow, pump, gas lift, etc.)					Date of Test	Date First New Oil Run 10 Tanks		
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL depth or be for full 24 hours)								
SACKS CEMENT	138 НІ430			ING & TUBING	CYS	HOFE SIZE		
TUBING, CASING, AND CEMENTING RECORD								
Depth Casing Shoe						Perforations		
ritoping Depth	۸	Name of Producing Formation			Elevations (DF, RKB, RT, GR, etc.)			
.0.1.8.9	Total Depth		Date Compl. Ready to Prod.		Date Compl. Re	Date Spudded		
Plug Back Same Res'v Diff. Res.'v	Morkover Deepen	lieW well	Gas Well	Oil Well	(x)	Designate Type of Completion — (X)		
	*					IV. COMPLETION DATA		

Tubing Pressaure (Shut-in)

Testing Method (pilot, back pt.)

Casing Pressure (Shut-in)