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TRANSPORTER	OIL	
	GAS	
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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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I. Operator
Tenneco Oil Company
Address
P. O. Box 1714 - Durango, Colorado
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
**Well deepened to Dakota and dualled
Request authority to transport - effective
first delivery.**

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Florance	Lease No. 35	Well No. 35	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal
Location Unit Letter A ; Feet From The _____ Line and _____ Feet From The _____ Line of Section 18 Township 30-N Range 8-W , 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"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 108 - Farmington, New Mexico			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990 - Farmington, New Mexico			
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 18	Twp. 30	Rge. 8
Is gas actually connected?		When No On Approval		

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.
		X			X			X
Date Spudded 10-26-66	Date Compl. Ready to Prod. 11-12-65		Total Depth 7745		P.B.T.D. 7718			
Elevations (DF, RKB, RT, GR, etc.) 6393' DF	Name of Producing Formation Basin Dakota		Top Oil/Gas Pay 7488		Tubing Depth 7451			
Perforations 7488 - 7702					Depth Casing Shoe 7745			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 6-1/4"	CASING & TUBING SIZE 4-1/2 11.6 & 10.5#		DEPTH SET 7745		SACKS CEMENT First stage 375 sacks Second stage 225 sacks			
	2-3/8		7451					

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 2267	Length of Test 3 Hour	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure 171	Casing Pressure Packer	Choke Size 3/4"

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.

Harold C. Nichols
Harold C. Nichols (Signature)
Senior Production Clerk
(Title)

February 18, 1966
(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAR 14 1966**

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 only Sections I, II, III, and VI 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.