

NO. OF COPIES RECEIVED
DISTRIBUTION
SANTA FE
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER OIL
GAS
OPERATOR
PRORATION OFFICE

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

Form C-104
Supersedes Old C-101 and C-110
Effective 1-1-65

Operator
Tenneco Oil Company
Address
Suite 1200 Lincoln Tower Bldg. - Denver, Colorado 80203
Reason(s) for filing (Check proper box)
New Well
Recompletion
Change In Ownership
Change In Transporter of:
Oil
Casinghead Gas
Dry Gas
Condensate
Other (Please explain)
Change of authorized transporter of condensate only.
Effective 3/13/70

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

DESCRIPTION OF WELL AND LEASE
Lease Name
RIDDLE
Well No.
2
Pool Name, including Formation
Blanco Mesaverde
Kind of Lease
State, Federal or Fee
Lease No.
Location
Unit Letter
N
Feet From The
790
Line and
1850
Feet From The
W
Line of Section
17
Township
30N
Range
9W
NMPM, San Juan County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil
Plateau, Inc.
or Condensate
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
or Dry Gas
Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.
Unit
Sec.
Twp.
Rge.
Is gas actually connected?
When

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

COMPLETION DATA
Designate Type of Completion - (X)
Oil Well
Gas Well
New Well
Workover
Deepen
Plug Back
Same Restv.
Diff. Restv.
Date Spudded
Date Compl. Ready to Prod.
Total Depth
P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)
Name of Producing Formation
Top Oil/Gas Pay
Tubing Depth
Perforations
Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE
CASING & TUBING SIZE
DEPTH SET
SACKS CEMENT

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
OIL CON. COM. DIST. 3

GAS WELL
Actual Prod. Test - MCF/D
Length of Test
Bbls. Condensate/MMCF
Gravity of Condensate
Testing Method (pilot, back pr.)
Tubing Pressure (Shut-in)
Casing Pressure (Shut-in)
Choke Size

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.
G. A. Ford
Sr. Production Clerk

OIL CONSERVATION COMMISSION
APPROVED
Original Signed by Emery C. Arnold
BY
TITLE
SUPERVISOR
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 data tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allow...