

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-104 and C-110  
Effective 1-1-65



Operator TENNECO OIL COMPANY	
Address 1860 Lincoln, Suite 1200, Denver, Colorado 80203	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

### II. DESCRIPTION OF WELL AND LEASE

Lease Name Florance	Well No. 9A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee Federal	Lease No. 081001
Location Unit Letter <u>J</u> : <u>1850</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>East</u> Line of Section <u>13</u> Township <u>30N</u> Range <u>9W</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"/>	Address (Give address to which approved copy of this form is to be sent)
Plateau Refining	P. O. Box 108, Farmington, New Mexico 87401
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Southern Union Gathering Co.	P. O. Box 398, Bloomfield, New Mexico 87413
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
J 13 30N 9W No	

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					
Date Spudded 11-29-75	Date Compl. Ready to Prod. 2-3-76	Total Depth 7050'	P.B.T.D. 6675'					
Elevations (DF, RKB, RT, GR, etc.) 5817 GL	Name of Producing Formation Mesa Verde	Top Oil/Gas Pay 4229'	Tubing Depth 5031'					
Perforations 5004-5012, 2 JSPF; 6910-7016-squeezed off. 4229-4412, 22 shots; 4524-4652, 15 shots; 4785-4960, 22 shots;								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/2"	9 5/8"	218'	200 sacks					
8 3/4"	7"	3100'	463 sacks					
6 1/8"	4 1/2"	2780 - 7050'	420 sacks					
	2 3/8"	5031'						

### 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 2087 MCF/D	Length of Test 3 hrs.	Bbls. Condensate/MMCF AOF 5078 MCF	Gravity of Condensate
Testing Method (pitot, back pr.) Back pressure	Tubing Pressure (shut-in) 540	Casing Pressure (shut-in) 540	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.

Carley Matthews  
(Signature)

Division Clerical Supervisor

(Title)

2/26/76  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED MAR 1 1976, 19  
BY Original Signed by A. R. Kendrick  
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.

Form C-104 must be filed for each pool in multiply