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LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			

NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS PRORATION OFFICE Operator Tenneco Oil Company P. O. Box 3249, Englewood, CO 80155

Reason(s) for filing (Check proper box) Other (Please explain) X Change in Transporter of: Oil Dry Gas Recompletion Condensate Casinghead Gas Change in Ownership If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation State, Federal or Fee <u>Federal</u> SF 080244 Basin Dakota 8 Riddle Com Location 790 1630 South Line and East Feet From The Feet From The Unit Letter Township 39N 30N Range 9W , ммрм, San Juan County 18 III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| Name of Authorized Transporter of Oil | or Condensate | | | Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil Box 460, Hobbs, New Mexico 88240 Conoco ress (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas _____ or Dry Gas X. Box 990, Farmington, New Mexico
Is gas actually connected? When El Paso Natural Gas Twp. P.ge. Unit Sec. If well produces oil or liquids, 9W ASAP 18 39N T No If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Flug Back Same Resty. Diff. Resty. Oll Well Gas Well Designate Type of Completion -(X)P.B.T.D. Total Depth Date Compl. Ready to Prod. 7506' 7/26/81 10/20/81 Tubing Depth Name of Producing Formation Top Off/Gas Pay Elevations (DF, RKB, RT, GR, etc., 6223' gr. 7257' 72581 Dakota Depth Casing Shoe Perforations 7257-73', 7302-05', 7363-78', 7410-24', 7439-42', 7492-96' TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 250 12-1/4" 8-3/4" 2551 9-5/8" 36# 7" 3469' 604 23# 7506**'** 535 4-1/2" 6-1/4" 10.5# (Test must be after recovery of total volume of load oil and must be equal to or receed top allow able for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks Choke Size Casing Pressure Tubing Pressure Length of Test Gas - MCF Water - Bbls. Cil - Bbls. Actual Prod. During Test OIL CON. COM. DIST. 3 **GAS WELL** Gravity of Bbls. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D 913 MCFD Casing Pressure (Shut-in) Choke Size Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) 3/4" 1.875 PSI 1875 PSI Back Pressure OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE NUA a -APPROVED. 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 FRANK T. CHAVEZ

/		
Sounder J. Feron		
(Signature)		
Production Analyst		
	Tielal	

(Date)

November 2, 1981

SHPERVISOR DISTRICT 語 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