<b></b>	• • •	1	
DISTRIBUTIO	N		
ANTA FE			
TILE			
J.S.G.S.	Ī		
LAND OFFICE			
TRANSPORTER	OIL	Ĭ	
	GAS		
OPERATOR			
BROBATION OF			

February 9, 1984

(Date)

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-11t Effective 1-1-65

	ILE		<del></del>	4	AND			•	
;	J.S.G.S.		<del></del>	AUTHORIZATION TO TRA	ANSPORT OIL AND	NATURAL G	AS		
-	LAND OFFICE	OIL							
-	TRANSPORTER	GAS	-+-	1			ONFIDENTI	<i>F</i> \L	
- }	OPERATOR	GAS		4		,		· · <del></del>	
		165	<del>-   -</del>	4			1		
1.	PRORATION OFF	ICE		1					
-	Tenneco Oil Company								
H									
	P.O. Box 32	2ΔQ Fr	na lew	ood, CO 80155		Other (Please explain)			
1	Reason(s) for filing	(Check pro	per box		Other (Pleas				
ŀ	New Well	X		Change in Transporter of:					
ĺ	Recompletion			Oil Dry Go	FEB 1 3 198 :				
	Change in Ownership Casinghead Gas Condensate								
							DICT		
	If change of owners and address of prev						DIST. 3		
	and address of prev	TOUS OW!	c						
П.	DESCRIPTION O	F WELL	AND	LEASE					
	Lease Name			Well No. Pool Name, Including F		Kind of Lease	UJA	Lease No.	
	Riddle			4S Blanco Fruit	land	State, Federal	or Fee SF	080244	
	Location						_		
	Unit Letter G		165	O The N Li	ne ard 1810 t	Feet From T	'heE		
	· ·					_			
	Line of Section	21	To	waship 30N Range	9W , NMP	м, Sar	n Juan	County	
m.	DESIGNATION O	F TRAN	SPOR	TER OF OIL AND NATURAL G	AS				
	Name of Authorized	Transport	er of Oil	or Condensate X			ed copy of this form is	to be sent)	
	Conoco, Inc.	Suraf	ce Tr	ransportation	P.O. Box 460,	Hobbs, N	M 88240		
	Name of Authorized	Transport	er of Ca	singhead Gas or Dry Gas 🔨	1		ed copy of this form is	to be sent)	
	El Paso Natu	ral Ga	s Cor	npany	F.O. Box 1492				
	If well produces oil			Unit Sec. Twr. Pge.	Is gas actually connec	•			
	give location of tank		'	G 21 T3ON R9W	No		SAP		
	If this production i	s commin	gled wi	ith that from any other lease or pool	, give commingling ord	er number:			
	COMPLETION D		Brog w.						
			,	Oil Well Gas Well	New Well Workover	Deepen	Plug Back   Same Re	s'v. Diff. Res'v.	
	Designate Ty	pe of Co	mpleti	on – (X)	, X		1		
	Date Spudded			Date Compl. Ready to Proa.	Total Depth		P.B.T.D.	1	
	8/23/83			1/3/84	2645' KB		2630' KB		
	Elevations (DF, RK	B, RT, GF	?, etc.,	Name of Producing Formation	Top Cil/Gas Pay		Tubing Depth		
	5934' GR			Fruitland	2512' KB		2450' KB		
	Perforations					. 04561 04	Depth Casing Shoe	ļ	
	2512'-2522'	. 2530	<u> -253</u>	2', 2550-2554', 2573'-25	576',2584'-2590	,2456 -24	/k		
				TUBING, CASING, AN	TO CEMENTING RECU	RU			
	HOLE	SIZE		CASING & TUBING SIZE	DEPTH	SET	SACKS CE		
	12-1/4"			8-5/8"	228' KB		354 cf, 300 s		
	8-3/4"			5-1/2"	2645' KB 2	245	729 cf, 450 s	• X	
				2-1/16"	2450' KB				
							<u> </u>		
V.	TEST DATA AN	D REQU	EST F	FOR ALLOWABLE (Test must be	after recovery of total vo	lume of load oil	and must be equal to or	exceed top allow-	
•	OIL WELL			able for this	depth or be for full 24 hor Froducing Method (Fl		6 22	<del></del>	
	Date First New Oil	Run To T	ank s	Date of Test	Froducing Method (F.	ow, pump, gas	,,, <del>4.</del> ,		
							Choke Size		
	Length of Test			Tubing Pressure	Casing Pressure		Chore size		
					Vater - Bbls.		Gas - MCF		
	Actual Prod. During	g Test		Oil-Bbls.	rdier - Dbis.		000		
	GAS WELL			Length of Test	Fible. Condensate/MN	ACF.	Gravity of Condensat		
	Actual Prod. Test	- MCF/D		- •	EDIE. Condensate/Mi	nC P			
	1697			3 hrs	Casing Pressure (Sh		Choke Size		
	Testing Method (pi		pr.)	Tubing Pressure (Shut-in)	510 PSI	,	3/4"		
	Back Pressu			495 PSI					
VI	CERTIFICATE	OF COM	IPLIA!	NCE	ll oir	. CONSERVA	ATION COMMISSION	אכ	
					APPROVES	14,19	o 984	, 19	
	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.  (Signature)								
				n By Original Sig	Desirand Class 11 Charles and the control of the co				
				SALPERVIS	SELECTION COLOR THE P				
				TITLE					
				This form is	to be filed in	compliance with RU	_E 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					
		(Signature)				use he eccomo	anied by a tabulation ordence with RULE 1	OI INS GAAISTION	
	Senior Prod	duction	n Ana	lvst	tests taken on th	e well IV scco	ust be filled out comp	letely for allow-	
	Senior From	uuc c I U	, <u>, , , , , , , , , , , , , , , , , , </u>	Title)	All sections able on new and	recompleted w	ells.		

able 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.

Secrete Forms C-104 must be filed for each coal in multiply