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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-11  
Effective 1-1-85

Loc. #0076438

Operator  
Tenneco Oil Company

Address  
P. O. Box 3249, Englewood, Co. 80155

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Barrett	Well No. 1E	Pool Name, Including Formation Basin Dakota	Kind of Lease USA State, Federal or Fee SF	Lease No. 078336-B
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Location

Unit Letter C ; 500 Feet From The North Line and 1460 Feet From The West

Line of Section 20 Township 31N Range 9W , 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"/> Conoco Inc. Surface transportation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 460, Hobbs, N. M. 88240
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1990, Farmington, N. M. 87499

If well produces oil or liquids, give location of tanks.	Unit C	Sec. 20	Twp. 31N	Rge. 9W	Is gas actually connected? No	When As soon as possible
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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 12/8/84	Date Compl. Ready to Prod. 1/31/85	Total Depth 8000' KB	P.B.T.D. 7953' KB
Elevations (DF, RKB, RT, GR, etc.) 6492' GR	Name of Producing Formation Dakota	Top Oil/Gas Pay 7735' KB	Tubing Depth 7802' KB
Perforations 2 JSPF, 54', 108 holes 7735-62', 7781-84', 7823-40', 7894-7901' KB			Depth Casing Shoe 7997' KB

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	9-5/8" csg	324' KB	225 sx 265 GF
8-3/4"	7" csg	3929' KB	563 sx 899 CF
6-1/4"	4-1/2" liner csg	3749'-7997' KB	400 sx 620 CF
	2-3/8" tbg	7802' KB	-----

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
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

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FEB 15 1985  
OIL CON. DIV.  
DIST. 3

GAS WELL

Actual Prod. Test-MCF/D 1047	Length of Test 3 hrs	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) back pressure	Tubing Pressure (Shut-in) 965	Casing Pressure (Shut-in) 1310	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.

Scott McKinney  
(Signature)  
Sr. Regulatory Analyst  
(Title)  
(Date)

OIL CONSERVATION COMMISSION  
3-18-85  
APPROVED  
MAR 18 1985  
BY  
Original Signed by FRANK T. CHAVEZ  
SUPERVISOR DISTRICT # 3  
TITLE

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.