

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P.O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

Operator Tenneco Oil Company	
Address P.O. Box 3249, Englewood, Colorado 80155	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Barrett	Well No. 7	Pool Name, Including Formation Blanco, Pictured Cliffs	Kind of Lease State, Federal or Fee FED	Lease No. SF-078336-G
Location				
Unit Letter I : 1635 Feet From The South Line and 715 Feet From The East				
Line of Section 19 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"/> Giant Refining	Address (Give address to which approved copy of this form is to be sent) Box 256, Farmington, New Mexico 87401	
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 990, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 19
	Twp. 31N	Rge. 9W
Is gas actually connected? No		When 3rd Quarter, 1987

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

<i>Mike McRedie</i> (Signature)	<i>Charles Olson</i> (Signature)
Administrative Analyst	Re-Issued
August 26, 1987 (Date)	11/6/87 (Date)

APPROVED	OIL CONSERVATION DIVISION NOV 12 1987
BY	Original Signed by CHARLES OLSON
TITLE	DEPUTY OIL & GAS INSPECTOR, DIST. 43

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 Section I, II, III, and VI for changes of owner, well name and or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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 08/02/87	Date Compl. Ready to Prod. 08/16/87		Total Depth 3575'		P.B.T.D. 3548'				
Elevations (DF, RKB, RT, GR, etc.) 6554' KB	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 3342' - 3394'		Tubing Depth				
Perforations 3342' - 3394' 52 feet - 104 Holes						Depth Casing Shoe 3564'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
8 3/4"	7"		242'		118 ft ³ Class B w/additives				
6 1/4"	3 1/2"		3564'		200 ft ³ 65/35 w/additives				
					Tail w/239 ft ³ Class H				
					w/additives cement top				
					@ 1100 per temp survey				

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 1961	Length of Test 3 Hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr) AOF	Tubing Pressure (Shut-in) N/A	Casing Pressure (Shut-in) 653 PSIG	Choke Size 3/4"