STATE OF NEW MEXICO **ENERGY AND MINERALS DEPARTMENT**

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U.S.G.S.		
LAND OFFICE		
	OIL	
TRANSPORTER	GAS	
OPERATOR		
PRORATION OFFICE		

OIL CONSERVATION DIVISION P.O. BOX 2088 SANTA FE, NEW MEXICO 87501

Revised 10-01-78 Format 06-01-83

Form C-104

REQUEST FOR ALLOWABLE AND

RORATION OFFICE	AUTHORIZATION TO TRANS	PORT OIL AND NATUR	DIST. 3	<u>. </u>
perator				
Tenneco Oil Company				
ddress				
P.O. Box 3249, Englewo	od, CO 80155	Other (Please ex	nlain)	
eason(s) for filing (Check proper box)		Other (Flease 6x)	one and	
	ransporter of:			
Recompletion Oil	☐ Dry Gas		•	
Change in Ownership Casing	ghead Gas Condensate			
change of ownership give name				
d address of previous owner				
DECORPTION OF WELL AND L	EACE		* SF-078336	-B
DESCRIPTION OF WELL AND L	Well No. Pool Name, Including Form	nation	Kind of Lease State, Federal or Fee	Lease No
Barrett	11 Blanco Pict	ured Cliffs	Federal Federal	*
ocation	900		1115	
X D .	Feet From The No	rth Line and	Feet From The Wes	t
Unit Letter	, , , , , , , , , , , , , , , , , , , ,		Cara Juan	
Line of Section 20	Township 31N	Range 9W	, _{NMPM} , San Juan	Cour
Line of operation				
I. DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS		this form is to be court	
Name of Authorized Transporter of Oil _ or Co	ndensate X		th approved copy of this form is to be sent)	
Conoco		P.U. BOX 46U,	Hobbs, NM 88240 ch approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead G				
El Paso Natural Gas Co	ompany	Is gas actually connected?	Farmington, NM 87401	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	is gas actually connected:		
IT WER DICCICES ON OF HOUSE.	! E ! 20 31N 9W	1	ì	

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						
1.1.						

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Sr. Administrative Analyst

12/16/87 (Date)

VI. CERTIFICATE OF COMPLIANCE

Original Signed by FRANK T. CHAVEZ BY 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 walls. 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.

Page 2 Form C-104 Revised 10-01-78 Format 06-01-83

IV. COMPLETION DATA

π 7/ε	9ISd 9Z9	575 PSIG	A0F = 3679
Choke Size	Casing Pressure (Shut-in)	Tubing Pressure (Shut-in)	Testing Method (pilot, back pt.)
		sunou E	2815
Gravity of Condensate	Bbls. Condensate/MMCF	Length of Test	
			GAS WELL Actual Prod. Test - MCF/D
			OVE WELL
Gas · MCF	Water - Bbls.	Oil - BPIS.	Actual Prod. During Test
			test easing beet leutak
Choke Size	Casing Pressure	Tubing Pressure	Length of Test
	Producing Method (Flow, pump, gas lift, etc.)	Date of Test	Date First New Oil Run To Tanks
oil and must be equal to or exceed top allowable for this	depth or be for full 24 hours)	R ALLOWABLE OIL WELL	V. TEST DATA AND REQUEST FO
A see below			
	Q.5 £ £	3/68	
3, 3021	[ist		
7	18745	,,, † †7	118/Z Z
	1818	"8/S 8	121"
SACKS CEMENT	DEPTH SET	CASING & TUBING SIZE	HOLE SIZE
34791	CEMENTING RECORD		
		səlon 8	33341-33731 19 feet 3
Saing Shoe	0./60		Perforations
	33341 - 33731	Blanco Pictured Cliffs	75 , 9679
3435 1 Tubing Depth	Top Oil/Gas Pay	Name of Producing Formation	Elevations (DF, RKB, RT, GR, etc.)
	16748	12/10/87	Z8/90/LL
G.T.B.9	Total Depth	Date Compl. Ready to Prod.	Date Spudded
	Х	X	- Hot aidures to add annifers
Plug Back Same Res'v. Diff. Res.'v	New Well Workover Deepen	Oil Well Gas Well	Designate Type of Comple ion –
			IV. COMPLETION DATA

20 sx (20ft3) Class B * 640 sx (1087ft3) 65/35/6