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DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.		Ī	
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			

November 10, 1981

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-11					
	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			Effective 1-1-65				
	LAND OFFICE	_ AUTHORIZATION TO TRA						
	CAND OFFICE OIL							
	TRANSPORTER GAS	┪						
	OPERATOR	7						
1.	PRORATION OFFICE							
	Operator							
	Tenneco Oil Company	<u> </u>						
	Address							
	P. O. Box 3249, End		104 504			·		
	Reason(s) for filing (Check proper bo.	•	Other (Pleas	e explain)		,		
	Recompletion				•			
	Change in Ownership Casinghead Gas Condensate							
	If change of ownership give name			-	•			
	and address of previous owner							
11.	DESCRIPTION OF WELL AND LEASE							
	Lease Name	Well No. Pool Name, Including F	formation	Kind of Lease		Lease No.		
	Moore C	lE Basin Dako	ota	State, Federal or I	Fee Federal SH	078147		
	I	7/5	209					
	Unit Letter H ; 47	725 Feet From The North Lin	ne and <u>800</u>	Feet From The	East			
	27	200	3.000					
	Line of Section 27 To	ownship 32N Range	12W , NMPN	. San Juan		County		
ĮT	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS					
	Name of Authorized Transporter of Oi		Address (Give address	to which approved o	copy of this form is to	be sent)		
	Conoco		P. O. Box 460), Hobbs, Ne	w Mexico 882	240		
	Name of Authorized Transporter of Co	singhedd Gas or Dry Gas X	Address (Give address					
	Northwest Pipeline		P. O. Box 15	26, Salt Lak	e City, UT	84110		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connect	ted? When				
	give location of tanks.	H 27 32N 12W	No		ASAP			
	If this production is commingled w	ith that from any other lease or pool,	give commingling orde	r number:				
	COMPLETION DATA					15.77 5		
	Designate Type of Completi	$\operatorname{fon} = (X)$ Oil Well Gas Well X	New Well Workover	Deepen Pl	ug Back Same Res!	v. Diff. Restv.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P	B.T.D.	<u> </u>		
	8/12/81		· ·	-	7432'			
	Elevations (DF, RKB, RT, GR, etc.,	11/3/81 Name of Producing Formation	7434 Top Oil/Gas Pay		ubing Depth			
	6120' gr.	Dakota	7368'		7374'			
	Perforations	1		De	epth Casing Shoe			
	7368-72', 7404-06', 7414-22' Dakota							
		TUBING, CASING, AN	D CEMENTING RECO	RD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH S		SACKS CEMI	ENT		
	12-1/4"	9-5/8" 36# 7" 23#	313		250 265			
	8-3/4"	7 2511	4969'		265			
	6-1/4"	4-1/2" 10.5#	7434'		320			
	<u></u>	2-3/8"						
V.	TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be a able for this di	after recovery of total vol epth or be for full 24 hour	ume of load oil and : s)	must be equal to or ex	ceed top allow-		
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flor		(c.)			
					COFIL			
	Length of Test	Tubing Pressure	Casing Pressure		ori-fills			
					TLLLI Y []	1		
	Actual Prod. During Test	Oil-Bble.	Water-Bbis.		MOV 1 0 4004	1		
					NOV 16 1981			
				\ 01	L CON. COM.			
	GAS WELL		I Balla C I I I I I I I I I I I I I I I I I I		ravity of Condensate	/		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	· ·	datify of Courses	,		
	1248 Testing Method (pitot, back pr.)	3 hr. Tubing Pressure(Shut-in)	Casing Pressure (Shut	-in)	hoke Size			
	•			,	3/4"			
•-	Back Pressure	1725 PSI	1775 PSI	CONSERVATION		ı		
/I .	CERTIFICATE OF COMPLIAN	ICE	OIL CONSE 2-9-92 APPROVED		UN COMMISSION 音句の	i		
I hereby certify that the rules an Commission have been complied			APPROVED		90 <u>4</u> .	19		
		with and that the information given						
	above is true and complete to th	is true and complete to the best of my knowledge and belief.			184162			
			TITLE					
		This form is to be filed in compli						
	$\mathcal{A} \mathcal{A} \mathcal{A}$							
	Saundan Taron (Sign	If this is a request for allowable fo well, this form must be accompanied by			l by a tabulation of	the deviation		
	Production Analyst		tests taken on the	well in accordant	CO WITH RULE 111.	•		
		itle)	All sections o	f this form must becompleted wells.	e filled out complet	era tot strom-		

All sections of this form must be filled out completely for showable 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