

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

RECEIVED
SEP 16 1987
OIL CON. DIV.
DIST. 3

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

I. Operator
Tenneco Oil Company

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

Reason(s) for filing (Check proper box)
☒ New Well
☐ Recompletion
☐ Change in Ownership
 Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☒ Dry Gas
☐ Condensate
 Other (Please explain)

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Storey A	Well No. 2	Pool Name, Including Formation Blanco, Pictured Cliffs	Kind of Lease State, Federal or Fee Federal	Lease No. NM-048
Location Unit Letter A : 1040 Feet From The North Line and 800 Feet From The East Line of Section 35 Township 32N Range 11W , 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 type="checkbox"/> Giant Refining	Address (Give address to which approved copy of this form is to be sent) P. O. Box 256 Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input 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, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 35
	Twp. 32N	Rge. 11W
Is gas actually connected? No		When

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.


(Signature)
Sr. Administrative Analyst
(Title)
9-9-87
(Date)

OIL CONSERVATION DIVISION
APPROVED **10-15-**, 19 **87**
BY **Original Signed by FRANK T. CHAVEZ**
TITLE **SUPERVISOR DISTRICT 3**

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	X	New Well	X	Workover	Deepen	Plug Back	Same Res.v.	Diff. Res.v.
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Uate Spudded	7/17/87	Uate Compl. Ready to Prod.	8/10/87	Total Depth	3307	P.B.T.D.	3190
Elevations (D.F., RKB, RT, GR, etc.)	6310' GR	Name of Producing Formation	Blanco, Pictured Cliffs	Top Oil/Gas Pay		Tubing Depth	N/A
Perforations	3080' - 3168' 78' - 156 Holes						
TUBING, CASING, AND CEMENTING RECORD							

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
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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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
92 781	3 Hours	N/A	N/A
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Absolute Open Flow	N/A	479	3/4"