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State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

RECEIVED
JAN 3 0 1989
OIL CON. DIV.
DIST. 3
C-104
1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Tenneco Oil E&P	Well API No. 30-045-26996
Address 6162 S. Willow Drive, Englewood, CO 80111	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Fields LS	Well No. 7R	Pool Name, including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee	Lease No. NM-010989
Location Unit Letter <u>G</u> : <u>1925</u> Feet From The <u>North</u> Line and <u>2055</u> Feet From The <u>East</u> Line Section <u>34</u> Township <u>32N</u> Range <u>11W</u> , <u>NMPM</u> , 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"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas	Box 1492, El Paso, TX 79978					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?

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						
Date Spudded 8/9/88	Date Compl. Ready to Prod. 9/11/88		Total Depth 5560'		P.B.T.D. 5514'			
Elevations (DF, RKB, RT, GR, etc.) 6132 KB	Name of Producing Formation Mesaverde		Top Oil/Gas Pay 4348'		Tubing Depth 5269'			
Perforations 4984-5415 (152', 304 Holes), 4348-4874 (174', 348 Holes)					Depth Casing Shoe 5560'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	9 5/8"		250'		200 SX (236 ft ³)			
8 3/4"	7"		3237'		495 SX (749 ft ³)			
6 1/4"	4 1/2"		5560'		335 SX (499 ft ³)			
	2 3/8"		5269'					

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 Tank	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 1952	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Flowing	Tubing Pressure (Shut-in) 670 psi	Casing Pressure (Shut-in) 670 psi	Choke Size 3/4"

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Steve Foster
Signature
Steve Foster, Sr. Administrative Analyst
Printed Name
1/23/89 (303) 740-2447
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JAN 3 0 1989
By Original Signed by FRANK T. CHAVEZ
Title SUPERVISOR DISTRICT # 3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.