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Appropriate District Office
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DISTRICT II
P.O. Drawer DD, Astonia, NM \$8210

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION P.O. Box 2088

JAN3 01989

DISTRICT III	Santa Fe, New Mexico 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION DIST. 3 TO TRANSPORT OIL AND NATURAL GAS WAILAPI No.								
1000 Rio Brazos Rd., Aziec, NM 87410	REQUES	TRANS	ALLOWAE	BLE AND A	UTHORI	ZATON-	DIST. 3	3	
Operator	10	INANS	PONT OIL	. ANU INA	UNAL GA	NAI /	API No.		
Tenneco Oil E&P						1	30-04:		1991
Adress						1_2	20 5 7	7 7 6	· / / E
6162 S. Willow Drive	Fnalewa	nd Cn	80111						
lesson(s) for Filing (Check proper box)	, Liigicwe	, ou, oo	00111	0	r (Please expl	ija)			
irw Well	O _M	nge is Tree	porter of:			•			
Lecompletics	Oii	Ŭ Dry	- —						
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change of operator give name d address of previous operator									
DESCRIPTION OF WELL						Vind.	of Lana		ase No.
Acces Name	7.6		ool Name, Including Formation I anco Mesaverde				Kind of Losse State, Federal or Fee		0989
Fields LS	1/5	(anco mesa	averue			deral Lea	1 1111 01	0303
G	192/5		No	orth	. 20	55°		East	
Unit Letter	- :	Foot	From The	Line	best	R	et From The		Line
Section 34 Township	32N	Ren	_ 1	IW	APM.		San Juar	1	County
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Actual Prod. During Test

Longth of Test

Date First New Oil Run To Tank

GAS WELL								
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate					
1952	3.hrs.							
Testing Method (pitet, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choks Size					
Flowing	670 psi	670 <u>psi</u>	3/4"					
`								

Casing Pressure

Water - Bbis.

VL OPERATOR CERTIFICATE OF COMPLIANCE

Date of Test

Oil - Bbls.

Tubing Pressure

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, Administrative Analyst Printed Name Title 1/23/89 (303)740-2447

OIL CONSERVATION DIVISION

JAN 3 0 1989 Date Approved __

Original Signed by FRANK T. CHAVEZ By_

Producing Method (Flow, pump, gas lift, etc.)

SUPERVISOR DISTRICT # \$ Title_

Choke Size

Ges- MCF

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.
- 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.

Telephone No.

4) Separate Form C-104 must be filed for each pool in multiply completed wells.