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	GAS
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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

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MAR 31 1981

I. Operator **TENNECO OIL COMPANY** O.C.C. AREA OFFICE

Address **6800 Park Ten Blvd., Suite 200 North, San Antonio, TX. 78213**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☒ Change in Transporter of: Change Lease Name To:

Recompletion ☐ Oil ☐ Dry Gas ☐

Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐ State JL-36 Com

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>State JL-36 Com</b>	Well No. <b>1</b>	Pool Name, including Formation <b>North Turkey Trade Morrow</b>	Kind of Lease <b>State, Federal or Fee</b>	State <b>State</b>	Lease No. <b>E-1819</b>
Location Unit Letter <b>0</b> ; <b>660</b> Feet From The <b>South</b> Line and <b>1980</b> Feet From The <b>East</b>					
Line of Section <b>36</b> Township <b>18S</b> Range <b>29E</b> , NMPM, <b>Eddy</b> 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)					
<b>Transwestern Pipeline Co</b>						
If well produces oil or liquids, give location of tanks.	Unit <b>0</b>	Sec. <b>36</b>	Twp. <b>18S</b>	Rge. <b>29E</b>	Is gas actually connected? <b>Yes</b>	When <b>4-3-81</b> <del>3-27-81</del>

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.
			<b>X</b>	<b>X</b>					
Date Spudded <b>8-8-80</b>	Date Compl. Ready to Prod. <b>12-9-80</b>		Total Depth <b>11,696'</b>		P.B.T.D. <b>11,696'</b>				
Elevations (DF, RKB, RT, GR, etc.) <b>3430' GL</b>	Name of Producing Formation <b>MORROW</b>		Top Oil/Gas Pay <b>11216 11145'</b>		Tubing Depth <b>11,158'</b>				
Perforations <b>11216-226</b>					Depth Casing Shoe <b>11,691'</b>				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
<b>17 1/2"</b>	<b>13 3/8"</b>		<b>295'</b>		<b>315 sx claim "C"</b>				
<b>11"</b>	<b>8 5/8"</b>		<b>2829'</b>		<b>310 sx claim "C" "H"</b>				
<b>7 7/8"</b>	<b>5 1/2"</b>		<b>11691'</b>		<b>900 sx claim "H"</b>				
			<b>278"</b>		<b>11199 w/ Pk @ 11158'</b>				

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 Tanks	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 <b>845</b>	Length of Test <b>1 hr.</b>	Bbls. Condensate/MMCF <b>3 BO</b>	Gravity of Condensate
Testing Method (pitot, back pr.) <b>Back Pressure</b>	Tubing Pressure (Shut-in) <b>2602</b>	Casing Pressure (Shut-in) <b>Packer</b>	Choke Size <b>8/64</b>

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

PRODUCTION ANALYST

(Title)

3/30/81

(Date)

OIL CONSERVATION COMMISSION

APPROVED **APR 13 1981**, 19

BY **W. A. Gressett**  
SUPERVISOR, DISTRICT II

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 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 multiple completed wells.