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TRANSPORTER OIL _____
GAS _____
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PRORATION OFFICE _____

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
SEP 3 10 44 AM '65

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

Tenneco Oil Company

Box 1031, Midland, Texas

Reason(s) for filing (check proper box)

New Well _____ Change in Transporter of _____ Other (Please explain) _____
Improvement _____ Change name of field from South Lane
Change in Ownership _____ Disturbance Gas _____ Pennsylvania

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name _____ Well No. _____ Pool Name, including Formation _____ Kind of Lease _____
State "EF" ~~Unit~~ (C-1) 3 Inbe-Pennsylvanian State, Federal or Fee State
Location _____
Unit Letter K 2130 Feet From The south Line and 1830 Feet From The west
Line of Section 6 Township 11-S Range 34-E N.M.P.M. Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate _____ Address (Give address to which approved copy of this form is to be sent) _____
Service Pipe Line Company Amoco Pipeline Co. Box 337, Midland, Texas
Name of Authorized Transporter of Gas ☒ or Dry Gas _____ Address (Give address to which approved copy of this form is to be sent) _____
Warren Petroleum Corporation Box 966, Lovington, New Mexico
If well produces oil or liquids, _____ Unit _____ Sec. _____ Twp. _____ Rge. _____ Is gas actually connected? _____ When _____
give location of tanks. J 6 11-S 34-E yes 12-1-64

If this production is commingling with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X) _____
Date Spudded _____ Date Compl. Ready to Prod. _____ Total Depth _____ F.P.T.D. _____
Pool _____ Name of Producing Formation _____ Top Oil/Gas Pay _____ Tubing Depth _____
Perforations _____ Depth Casing Shoe _____
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE _____ CASING & TUBING SIZE _____ DEPTH SET _____ SACKS CEMENT _____

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 from To Tanks _____ Date of Test _____ Producing Method (Flow, pump, gas lift, etc.) _____
Length of Test _____ Tubing Pressure _____ Casing Pressure _____ Choke Size _____
Actual Prod. (bbls./day) _____ Oil-bbls. _____ Water-bbls. _____ Gas-MCF _____

GAS WELL

Actual Prod. (bbls./day) _____ Length of Test _____ bbls. Condensate/MCF _____ Gravity of Condensate _____
Testing Method (pilot, back pr.) _____ Tubing Pressure _____ Casing Pressure _____ Choke Size _____

VI. CERTIFICATE OF COMPLIANCE

OIL CONSERVATION COMMISSION

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.

APPROVED _____, 19 _____
BY _____

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 Sections I, II, III, and VI only 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 of multiple completed wells.

September 1, 1965

J. F. Carnes

District Production Foreman

(Title)

(Date)