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LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

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

Operator <i>Tenneco Oil Company</i>	
Address <i>P.O. Box 1031, Midland, Texas</i>	
Reason(s) for filing (Check proper box)	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 Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE		Kind of Lease
Lease Name <i>Merrell</i>	Lease No. <i>2</i> Pool Name, including Formation <i>Allison - Penn</i>	State, Federal or Fee <i>Fee</i>
Location		
Unit Letter <i>E</i>	<i>1830</i> Feet From The <i>North</i> Line and <i>660</i> Feet From The <i>West</i>	
Line of Section <i>10</i>	Township <i>9S</i> Range <i>36E</i>	NMPM, <i>Lea</i> County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	<i>Permian Corporation</i>	<i>Box 3117, Midland, Texas</i>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	<i>Warren Petroleum Co</i>	<i>Box 1589, Tulsa, Oklahoma</i>	
If well produces oil or liquids, give location of tanks.	Unit <i>H</i> Sec. <i>10</i> Twp. <i>9S</i> Rge. <i>36E</i>	is gas actually collected?	When <i>yes</i>

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

COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion - (X)		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					
Date Spudded <i>8/27/70</i>	Date Compl. Ready to Prod. <i>10-1-70</i>	Total Depth <i>9945'</i>		P.B.T.D. <i>9906'</i>					
Elevations (DF, RKB, RT, GR, etc.) <i>4049.7 GR</i>	Name of Producing Formation <i>Bough C</i>	Top Oil/Gas Pay <i>9828'</i>		Tubing Depth <i>9874'</i>					
Perforations <i>9828'-29'-30'-31'-44'-45' + 9846'</i>				Depth Casing Shoe <i>9945'</i>					

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<i>17 1/2"</i>	<i>13 3/8"</i>	<i>350'</i>	<i>375 SKs.</i>
<i>11"</i>	<i>8 5/8"</i>	<i>4150'</i>	<i>950 SKs.</i>
<i>7 1/8"</i>	<i>5 1/2"</i>	<i>9945'</i>	<i>175 SKs.</i>
	<i>2 7/8"</i>	<i>9874'</i>	

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 <i>10-1-70</i>	Date of Test <i>10-3-70</i>	Producing Method (Flow, pump, gas lift, etc.) <i>Flow</i>	
Length of Test <i>24 Hrs</i>	Tubing Pressure <i>220 #</i>	Casing Pressure <i>PKr.</i>	Choke Size <i>32/64"</i>
Actual Prod. During Test <i>435 Bbls.</i>	Oil - Bbls. <i>435</i>	Water - Bbls. <i>0</i>	Gas - MCF <i>478.50</i>

GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test - MCF/D	Length of Test	Casing Pressure	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure		

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.

Carley Watkins
(Signature)
Sec. Prod. Clerk
(Title)
10-5-70
(Date)

OIL CONSERVATION COMMISSION
APPROVED *NOV - 9 1970*
BY *[Signature]*
TITLE **SUPERVISOR DISTRICT I**

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 multiply

Deviation Surveys

Depth	Degree
350'	1/4
850'	1/2
1350'	1/2
2240'	1/2
2740'	3/4
3240'	1
3850'	3/4
4200'	3/4
4760'	1/4
5240'	1
5745'	1
6250'	1
6740'	1
7235'	3/4
7425'	3/4
8130'	3/4
8400'	3/4
8720'	1/2
9020'	1/2
9375'	3/4
9900'	3/4

I hereby certify that the above is true and complete to the best of my knowledge and belief.

Carter Shiffman

Subscribed & sworn to before me this 5th day of October, 1970 A.D.

James Brown

Notary Public, Midland County, Texas