|   | NO OF COPIES MECLINAD  | 1  |  |                                      |  |  |
|---|--|--|--|--------------------------------------|--|--|
|   |  | -  |  |                                      |  |  |
|   | DISTRIBUTION   | 1  | CONSERVATION COMMIST N   | Form C-104                           |  |  |
|   | SANTAFE  | REQUEST FOR ALLOWABLE Supersedes Old C-104 and C |  |                                      |  |  |
|   | FILE   | AND Effective 1-1-65                             |  |                                      |  |  |
|   | U.S.G.S.   | _ AUTHORIZATION TO TR                            | ANSPORT OIL AND NATURAL (  | SAS                                  |  |  |
|   | LAND OFFICE  |  |  |                                      |  |  |
|   | TRANSPORTER GAS  |  |  |                                      |  |  |
|   | OPERATOR   | <del>-</del>                                     |  |                                      |  |  |
|   | PRORATION OFFICE   | 1  |  |                                      |  |  |
|   | Tenneco Oil Company  |  |  |                                      |  |  |
|   | Address  | oln St., Suite 1200, Den                         | ver Colonado 1203  |                                      |  |  |
|   | 1  |  | Tour and meaning ser   | CAS NI ST. NOT BE                    |  |  |
|   | Reason(s) for Iting (Check proper box  |  | Other (Thursday 200)   | 1/3/1/6 1 1076                       |  |  |
|   | New Weil   | Change in Transporter of: Oil Dry G              | <b>★</b> 1 1 2 4 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                   | 127710N TO 8-4070                    |  |  |
|   | Recompletion   |  |  |                                      |  |  |
|   | Change in Ownership  | Casinghead Gas Conde                             | er.sole  |                                      |  |  |
|   | If change of ownership give name   | THIS WELL HAS BEEN PLA                           | NOED IN THE POOR   |                                      |  |  |
|   | and address of previous owner  |  |  |                                      |  |  |
|   |  | MOTIFY THAS OSHIOE.                              | 1  |                                      |  |  |
| П.  | DESCRIPTION OF WELL AND  | LEASE   Well No.   Fool Name, Including F        | Formation  |                                      |  |  |
|   | Lease Name   |  |  | _                                    |  |  |
|   | Tenneco Sunshine   | 1 North Bagi                                     | Cy refill State, resetts   | 166                                  |  |  |
|   | Location   | on South   | 660  | Fact                                 |  |  |
| Unit Letter I : 190 Feet From The South Line and 660 Feet From The East |  |  |  |                                      |  |  |
|   |  | 120  | 32E . NMPM. Le   | 3                                    |  |  |
|   | Line of Section 1 Tox  | wiship 12S Range                                 | 32E , NMPM, Le   | a County                             |  |  |
|   |  |  |  |                                      |  |  |
| 111.  | DESIGNATION OF TRANSFOR  | TER OF OIL AND NATURAL G                         | Address (Give address to which approv                                    | ed copy of this form is to be centl  |  |  |
|   | Keine of Assistance  |  | P. O. Box 1183, Houston, Texas 77001                                     |                                      |  |  |
|   | Western Oil Transporters  Name of Authorized Transporter of Casinghead G of or Dry Gas |  | Address (Give address to which approved copy of this form is to be sent) |                                      |  |  |
|   | Name of Authorized Transporter of Cas  | singheda Citi or Dry Gas                         | Address fifte dadress to which approb                                    | ra copy of this form is to be senty  |  |  |
|   |  | T  | is gas actually connected? Whe   | <u> </u>                             |  |  |
|   | If well produces oil or liquids,   | Unit Sec Twp. Fge.                               |  |                                      |  |  |
|   | give location of tanks.  | <u> </u>   | No   | Near Future                          |  |  |
|   | If this production is commingled wit   | th that from any other lease or pool,            | give commingling order number:   | <u> </u>                             |  |  |
| IV.   | COMPLETION DATA  | Oil Well Gas Well                                | New Well Workover Deepen   | Plug Back   Same Resty. Diff. Resty. |  |  |
|   | Designate Type of Completic  | (Y)  | 1 1  | Ping Suck Same Nessy. Diff. Nessy.   |  |  |
|   |  |  | X  | 5.2.7.                               |  |  |
|   | Date Spudded   | Date Compt. Ready to Proc.                       | Total Depth  | P.B.T.D.                             |  |  |
|   | 8/19/76  | 10/11/76   | 10,595'  | 10,541                               |  |  |
|   | Elevations (DF, RKB, RT, GR, etc.,   | Name of Producing Formation                      | Top Oil/Gas Pay  | Tubing Depth                         |  |  |
|   | 4317 GL  | Cisco (Bough C)                                  | 9240'  | 9136'                                |  |  |
|   | Perforations   | 00401  |  | Depth Casing Shoe                    |  |  |
|   | 22 Holes from 9269 -   |  |  |                                      |  |  |
| - [   |  | TUBING, CASING, AN                               | CEMENTING RECORD   |                                      |  |  |
| ĺ   | HOLE SIZE  | CASING & TUBING SIZE                             | DEPTH SET  | SACKS CEMENT                         |  |  |
| 1   | 17-1/2"  | 13-3/8"  | 352'   | 400                                  |  |  |
| ì   | 12 1///  | ₹-5/2"   | 3749'  | 1180                                 |  |  |

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

Date First New Oil Run To Tanks

Date of Test

(Test must be after recc try of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

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

5-1/2"

| Date First New Oli Run 10 Janks | D3.6 01 1 Fa.   | Producting Council (1 to a) Party 1 | Producting demost in total party and |  |
|---------------------------------|-----------------|-------------------------------------|--------------------------------------|--|
| 10/8/76                         | 10/12/76        | · Floving                           |                                      |  |
| Length of Test                  | Tubing Pressure | Casing Fress we                     | Choke Size                           |  |
| 24 Hours                        | 350 Flowing     | Packer in hole                      | 28/64                                |  |
| Actual Prod. During Test        | Oil-Bhis.       | Water - Bb.s.                       | Gas - MGF                            |  |
| 672 BBLs                        | 672             | -0-                                 | 687.4                                |  |
|                                 | <u> </u>        |                                     |                                      |  |

10593'

9136'

| GAS WELL                         |                           |                           |                       |   |
|----------------------------------|---------------------------|---------------------------|-----------------------|---|
| Actual Pred. Test-MCF/D          | Length of Test            | Bbls. Condensate/MMCF     | Gravity of Condensate |   |
| Alica, Fred. 1001-100170         | Sandin of Lost            |                           |                       |   |
|                                  |                           |                           | <b>\</b>              | ] |
|                                  |                           | 5 (5) 10                  | Cheke Size            |   |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Cosing Pressure (Shut-in) | Chore Sire            |   |
|                                  | 1                         |                           |                       |   |
|                                  |                           |                           |                       |   |
| L                                |                           |                           |                       |   |

|  | 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.

| M. D. Marine                |  |
|-----------------------------|--|
| Division Production Manager |  |
| (Title)                     |  |
| (Date)                      |  |

OIL CONSERVATION COMMISSION

BY LEGISLEY OF

This form is to be filed in comp' ance with RULE 1104.

880

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