

DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION		Form C-104	
SANTA FE		REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-1	
FILE		AND		Effective 1-1-65	
U.S.G.S.		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE					
TRANSPORTER	OIL				
	GAS				
OPERATOR					
PRORATION OFFICE					
Operator					
Tenneco Oil Company					
Address					
720 So. Colorado Blvd., Denver, Colorado 80222					
Reason(s) for filing (Check proper box)			Other (Please explain)		
New Well	<input 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 checked="" type="checkbox"/>	Condensate	<input type="checkbox"/>
If change of ownership give name and address of previous owner					
DESCRIPTION OF WELL AND LEASE				*NM-0108997-A	
Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.	
Federal 26	7	Chaveroo, S.A.	State, Federal or Fee Federal	*	
Location					
Unit Letter	I	1980	Feet From The	South	Line and 660
			Feet From The	East	
Line of Section	26	Township	7S	Range	33E
				NMPM,	Roosevelt
					County
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 checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>			Address (Give address to which approved copy of this form is to be sent)		
Cities Service Company			Box 300, Tulsa, Oklahoma 74102		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? When
If this production is commingled with that from any other lease or pool, give commingling order number:					
COMPLETION DATA					
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen
					Plug Back
					Same Res'v.
					Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	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
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	Length of Test		Bbls. Condensate/MMCF		Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size
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 FEB 3 1978		
			BY Lee Clements		
			Oil & Gas Insp.		
			TITLE		
Division Production Manager			This form is to be filed in compliance with RULE 1104.		
(Signature)			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.		
(Title)			All sections of this form must be filled out completely for allowable on new and recompleted wells.		
1-26-78			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		
(Date)			Separate Forms C-104 must be filed for each pool in multiply completed wells.		