

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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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I.

Operator <b>Tenneco Oil Company</b>	
Address <b>P. O. Box 1031 Midland, Texas</b>	
Reason(s) for filing (Check proper box) 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"/>	
Other (Please explain)	

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>State "v"</b>	Lease No. <b>OG 4897</b>	Well No. <b>1</b>	Pool Name, Including Formation <b>Undesignated Chaveroo - San Andres R. 3139</b>	Kind of Lease State, Federal or Fee <b>State</b>
Location Unit Letter <b>C</b> ; <b>660</b> Feet From The <b>north</b> Line and <b>660</b> Feet From The <b>west</b> Line of Section <b>30</b> Township <b>7-south</b> Range <b>34-east</b> , NMPM, <b>Roosevelt</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>The Permian Corporation</b>	Address (Give address to which approved copy of this form is to be sent) <b>P. O. Box 3119, Midland, Texas</b>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit <b>F</b>	Sec. <b>30</b>	Twp. <b>7-S</b>	Rge. <b>34-E</b>	Is gas actually connected? <b>No</b>	When

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded <b>7-25-66</b>	Date Compl. Ready to Prod. <b>8-12-66</b>		Total Depth <b>4350</b>		P.B.T.D. <b>4308</b>			
Elevations (DF, RKB, RT, GR, etc.) <b>4320 GL</b>	Name of Producing Formation <b>San Andres</b>		Top Oil/Gas Pay <b>4110</b>		Tubing Depth <b>4210</b>			
Perforations <b>One 3/8" Jet @ 4298, 4293, 4285, 4280, 4274, 4271, 4266, 4259, 4256, 4247, 4234, 4231, 4221, 4193, 4187, 4180.</b>					Depth Casing Shoe <b>4348</b>			
<b>4176, 4167, 4154, 4110 TUBING, CASING, AND CEMENTING RECORD</b>								
HOLE SIZE <b>11</b>	CASING & TUBING SIZE <b>8-5/8</b>		DEPTH SET <b>362</b>		SACKS CEMENT <b>140</b>			
<b>7-7/8</b>	<b>4-1/2</b>		<b>4348</b>		<b>520</b>			
<b>4-1/2 casing</b>	<b>2-3/8</b>		<b>4210</b>		<b>Tubing</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 <b>8-30-66</b>	Date of Test <b>8-31-66</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Pump</b>	
Length of Test <b>24 hrs.</b>	Tubing Pressure <b>100 psi</b>	Casing Pressure <b>750 psi</b>	Choke Size <b>32/64</b>
Actual Prod. During Test <b>128 Bbls.</b>	Oil-Bbls. <b>128 Bbls.</b>	Water-Bbls. <b>TR</b>	Gas-MCF <b>TSTM</b>

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

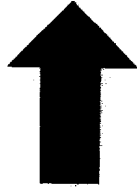
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

  
**A. W. Lang**  
(Signature)  
**District Production Superintendent**  
(Title)  
**XX September 2, 1966**  
(Date)

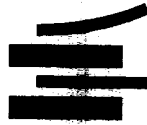
OIL CONSERVATION COMMISSION

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 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 completed wells.



**LTR**



**Job separation sheet**

State "V" No. 1  
Unit C, Section 30  
T-7-S, R-34-E  
660' FNL, 660' FWL  
Roosevelt County, New Mexico

NOTARY PUBLIC, N.C.C.

SEP 3 12 03 PM '66

DEVIATION SURVEYS

<u>Depth</u>	<u>Degrees of Deviation</u>	<u>Depth</u>	<u>Degrees of Deviation</u>
362'	1/4		
750'	1/4		
1240'	1/2		
1791'	1/2		
2230'	1		
2700'	1		
2903'	1-1/4		
3330'	1		
4054'	1		
4183'	1		
4350'	1		

AFFIDAVIT

State of Texas

County of Midland

Before me on this day personally appeared A. R. Gibson, known to me to be the person whose name is subscribed to this instrument, who after being duly sworn on Oath states that he represents Tenneco Oil Company in the capacity of District Drilling Engineer and that said report of Deviation Surveys contains no misstatements or inaccuracies and that no pertinent matter has been omitted, and that affiant is duly authorized to make this affidavit.

A. R. Gibson  
A. R. Gibson

Sworn to and subscribed before me this 2nd day of September, 1966.

Jeanne Ozmun Notary Public in and for Midland County, Texas.  
My Commission Expires June 1, 1967