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U.S.G.S.		
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

I. → DEVIATION SURVEY ON REVERSE SIDE ←

Operator TENNECO Oil Company	
Address Box 1031 MIDLAND, TEXAS 79701	
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

II. DESCRIPTION OF WELL AND LEASE

Lease Name ANDERSON-FEDERAL	Well No. 1	Pool Name, including Formation NORTH MORTON WOLF CAMP	Kind of Lease State, Federal or Fee FEDERAL	Lease No. NM 0228436-A
Location				
Unit Letter G	1980	Feet From The NORTH	Line and 1980'	Feet From The EAST
Line of Section 31	Township 14S	Range 35E	, NMPM, LEA 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"/>	Address (Give address to which approved copy of this form is to be sent)					
ADMIRAL CRUDE OIL CORP	P.O. Box 1713 MIDLAND, TEXAS 79701					
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)					
NONE						
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 31	Twp. 14S	Rge. 35E	Is gas actually connected? NO	When UNKNOWN

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
X		X		X					
Date Spudded 3-31-68	Date Compl. Ready to Prod. 5-8-68	Total Depth 10596		P.B.T.D. 10559					
Elevations (DF, RKB, RT, GR, etc.) 4061 DF	Name of Producing Formation WOLF CAMP REEF	Top Oil/Gas Pay 10456		Tubing Depth 10347					
Perforations TWO 1/2" JET SHOTS PER FOOT 10456-10460		Depth Casing Shoe 10595							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17 1/2	13 3/8		430		410				
11	8 5/8		4565		815				
7 7/8	5 1/2		10595		475				

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 5-8-68	Date of Test 5-8-68	Producing Method (Flow, pump, gas lift, etc.) FLOW	
Length of Test 24 HRS	Tubing Pressure 460	Casing Pressure PKR	Choke Size 14/64
Actual Prod. During Test 462	Oil - Bbls. 461	Water - Bbls. 1	Gas - MCF NA

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

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.

Monica R. Kanasch
(Signature)
SP. PROD. CLERK
(Title)
MAY 8, 1968
(Date)

OIL CONSERVATION COMMISSION
APPROVED _____, 19____
BY [Signature]
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.

Survey
Degree

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Hon. J. K. K. K.
 Sr. Prof. Clerk

NOTARY PUBLIC IN AND FOR HAWAII COUNTY, TERRITORY OF HAWAII

STUDENT CITY ST. LO
100 WILSON BLVD.
ST. LO, MO. 63104 78001
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