

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATION	
PROMOTION OFFICE	
Operator	

Tenneco Oil Company

Address 6800 Park Men Blvd., Suite 200 North San Antonio, Texas 78213

Reason(s) for filing (Check proper box)

New Well ☐
Recompletion ☐
Change In Ownership ☐

Change In Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☒ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Delhi-Federal	Well No. 1	Pool Name, Including Formation Lusk Strawn	Kind of Lease State, Federal or Fee Federal	Lease 1
Location Unit Letter C 660 Feet From The North Line and 1980 Feet From The West Line of Section 30 Township 19S Range 32E, NMPM, Lea Cour				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipe Line Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, N. M. 88240					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Continental Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 460, Hobbs, N. M. 88240					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? Yes	When January 12, 1982

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 Resrv.	Diff. Re
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 Shoes			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

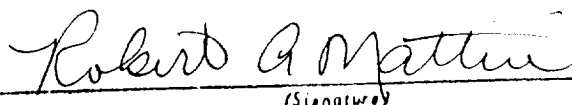
TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL(Test must be after recovery of total volume of load oil and must be equal to or exceed top a
ble for this depth or be for full 24 hours)

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/MCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

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

Production Engineer

(Title)

July 15, 1982

(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 19 1982, 19
Orig. Signed by
BY Les Clements
TITLE Oil & Gas Insp.

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deeper
well, this form must be accompanied by a tabulation of the devia
tions taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for all
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of own
well name or number, or transported or other such change of condiSeparate Form C-104 must be filed for each pool in mult
completed wells.

RECEIVED

JUL 19 1982

O.C.D.
HOBBS OFFICE