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| 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. Operator
Tenneco Oil Company
Address
1860 Lincoln Street, Suite 1200, Denver, Colorado 80203
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
Perforation of Justis Tubb
Drinkard Zone

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|---|----------------------|
| Lease Name Ginsberg Federal | Well No. 9 | Pool Name, including Formation Justis Tubb Drinkard | Kind of Lease State, Federal or Fee Federal | Lease No. NM 0569 |
| Location Unit Letter D ; 330 Feet From The North Line and 330 Feet From The West Line of Section 31 Township T 25S Range R38E , 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"/> Texas New Mexico Pipeline | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas 79701 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co. | Address (Give address to which approved copy of this form is to be sent) Box 990, Farmington, N. M. 87401 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit D | Sec. 31 | Twp. 25S | Rge. 38E | Is gas actually connected? Yes | When At original completion |

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 X | Gas Well | New Well | Workover X | Deepen | Plug Back | Same Res't. | Diff. Res't. X |
| Date Spudded 3/9/76 | Date Compl. Ready to Prod. 6/11/76 | | Total Depth 6957' | | P.B.T.D. 6886' | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3049' GL | Name of Producing Formation Blinebry/Fusselman/Drinkard | | Top Oil/Gas Pay 5730' | | Tubing Depth 5898' | | | |
| Perforations Justis Tubb Drinkard = 69 holes from 5730' - 5870' | | | | | Depth Casing Shoe | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 17-1/2 | 13-3/8" Casing | | 353' | | 350 Sacks | | | |
| 12-1/4 | 9-5/8" Casing | | 2265' | | 800 Sacks | | | |
| 8-3/4 | 7 Casing | | 6957 | | 415 Sacks | | | |

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)

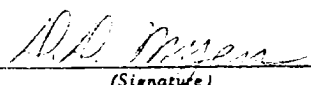
| | | | |
|--|-------------------------|--|----------------|
| Date First New Oil Run To Tanks 6/14/76 | Date of Test 8/18/76 | Producing Method (Flow, pump, gas lift, etc.) Pumping | |
| Length of Test 24 | Tubing Pressure 30 | Casing Pressure 30 | Choke Size |
| Actual Prod. During Test 9 | Oil-Bbls. 9 | Water-Bbls. 0 | Gas-MCF 8.8 |

GAS WELL

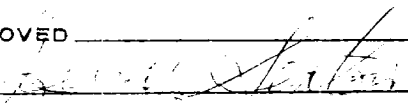
| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (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.


(Signature)
Div. Production Manager
(Title)
11-9-76
(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 multiple