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SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	OIL	<u> </u>		
	GAS	Ĺ		
OPERATOR				
		ĺ		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1 Ellective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TR	AND ANSPORT OIL AND NATURAL	CAS	
	LAND OFFICE	AUTHORIZATION TO TRA	ANSFORT OIL AND NATURAL	GAS	
	OIL				
	TRANSPORTER GAS				
	OPERATOR			· = · · .	
1	PRORATION OFFICE				
•.	Operator				
	Tenneco Oil Company		and the second s		
	Address		1 00005		
		uite 1200, Denver, Colora			
	Reason(s) for filing (Check proper box		Other (Please explain)		
	New Well XX	Change in Transporter of: Oil Dry Go			
	Recompletion	Casinghead Gas Conde			
	Change in Ownership	Cosmyricas Cas Cosman			
	If change of ownership give name				
	and address of previous owner	and the second s	and the second s		
**	. DESCRIPTION OF WELL AND LEASE *NM-7951				
11.	Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease				
	Leonard Federal	10 Leonard Queen	South State, Feder	roler Fee Federal *	
	Location				
	Unit LetterJ;19	80 Feet From The South Lir	ne and 1980 Feet From	The East	
	Line of Section 24 /4 Tox	waship 265 Range 3	7E , NMPM,	Lea County	
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	GAS Address (Give address to which approved copy of this form is to be sent)		
	Name of Authorized Transporter of Oil	Permian (Eff. 9 / 1 /87)	į.		
	Permian Corporation Name of Authorized Transporter of Cas		P.O. Box 3119, Midlan, Address (Give address to which appr	oved copy of this form is to be sent)	
	1		P.O. Box 990, Farming		
	El Paso Natural Gas C	Unit Sec. Twp. Pge.	Is gas actually connected? W	hen	
	If well produces oil or liquids, give location of tanks.	0 24 26S 37E	Yes	9/6/77	
		<u> </u>			
2 % 7	If this production is commingled with COMPLETION DATA	th that from any other lease or pool,	give comminging order names.		
3 V .		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.	
	Designate Type of Completic	on = (X)	! X	1 1	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	8-14-77	9-15-77	3597 '	3538'	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay 3374 '	Tubing Depth 3461'	
	2992.2' GL	Leonard Queen South	3374	Depth Casing Shoe	
	Perforations Perf'd 59 holes from 3	370' - 3447'			
	7 FETT & 33 Hotes 110111 3		D CEMENTING RECORD		
		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	12-1/4"	8-5/8"	471'	520 sacks	
	7-7/8"	5-1/2"	3595	1200 sacks	
	7-770	2-7/8"	3491'		
v	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	ifter recovery of total volume of load oi	l and must be equal to or exceed top allow	
OIL WELL able for this depth or be for full 24 hours)					
	Date First New Cil Run To Tanks	Date of Test		11)1, 210.7	
	9-15-77	9-17-77	Pumping Casing Pressure	Choke Size	
	Length of Test	Tubing Pressure	50	none	
	24 hours Actual Prod. During Test	50	Water-Bbls.	none Gas-MCF	
	Actual Press, During 1887	6	41	112	
	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 COMPLIAN	CE	OIL CONSERV	ATION COMMISSION	
		19// 19//			
	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)		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 to the form must be accompanied by a tabulation of the deviation.		
			tests taken on the well in accordance with RULE 111.		
	Div. Production Manager		All sections of this form must be filled out completely for allow		
(Title)		able 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

9-33-17 (Date)

Range

0.77

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