

DISTRIBUTION	
SANTA FE	
FILE	
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

Operator TENNECO OIL COMPANY	
Address 720 S. Colorado Blvd., Penthouse, Denver, Colorado 80222	
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	
THIS WELL HAS BEEN PLACED IN THE POOL LISTED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE	

Lease Name Leonard Bros.		Well No. 26	Pool Name, Including Formation Leonard Queen South R-5781	Kind of Lease State, Federal or Fee Federal	Lease No. NM-7951
Location					
Unit Letter D	660	Feet From The N	Line and 660	Feet From The W	
Line of Section 13	Township 26S	Range 37E	NMPM,	Lea	County

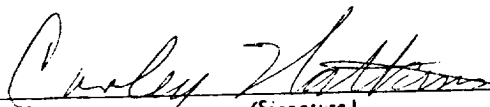
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
Permian Corp.		Box 1183, Houston, TX 77001			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas		Box 990, Farmington, NM 87401			
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 N	Sec. 11	Twp. 26S	Rge. 37E	Is gas actually connected? Yes
					When 7-20-78

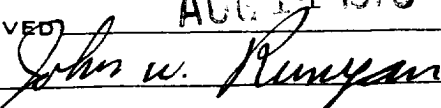

If this production is commingled with that from any other lease or pool, give commingling order number:

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded 6-22-78	Date Compl. Ready to Prod. 7-21-78	Total Depth 3600		P.B.T.D. 3545					
Elevations (DF, RKB, RT, GR, etc.) 3010' KB	Name of Producing Formation Queen	Top Oil/Gas Pay 3442		Tubing Depth 3478					
Perforations 3442-58, 3466-86, 3516-24 w/ 1 JSPF				Depth Casing Shoe 3600					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12-1/4"	8-5/8"		500		500				
7-7/8"	5-1/2"		3570		650				

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 7-30-78	Date of Test 8-2-78	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 37	Water - Bbls. 24	Gas - MCF 74

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.	
	
Administrative Supervisor	
(Title)	
8/8/78	
(Date)	

OIL CONSERVATION COMMISSION	
APPROVED  AUG 14 1978	
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.	