ì	HO. OF COPIES RECEIVED				
:	DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSION	Form C-104	
!	SANTA FE /		FOR ALLOWABLE	Supersedes Old C-104 and C-116	
i	FILE I V		AND	Effective 1-1-85	
;	U.S.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL &		
	LAND OFFICE				
	TRANSPORTER GAS			6:196 7	
:	OPERATOR j		ν,	Julia II - Com.	
1.	PRORATION OFFICE			N CON. COM.	
!	Operator			DIST. 3	
:	Tenneco Oil Company				
	P. O. Box 1714, Durango, Colorado 81301				
	Reason(s) for filing (Check proper box)		Other (Please explain)		
	New Mell	Change in Transporter of:	TRANSPORTER CHANGED	FROM SHELL	
	Recompletion	Oil Dry Gar Casinghead Gas Conden			
	Change in Ownership .	Casinghead das Conden.	OIL COMPANY TO SHEEL CORPORATION EFFECTIVE	F 12/31/05	
	If change of ownership give name and address of previous owner				
II DESCRIPTION OF WELL AND LEASE					
II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease				, -	
	Hospah 6 South Hospah Lower Sand State, Federal or Fee NM-08120				
	Location				
	Unit Letter Lot 1 : 330 Feet From The North Line and 330 Feet From The East				
	Line of Section 12 Township 17N Range 9W , NMPM, McKinley County				
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this				ed copy of this form is to be sent)	
	Shell Oil Compan	==	P. O. Box 1588, Farming		
		me of Authorized Transporter of Casinghead Gas or Dry Gas		Address (Give address to which approved copy of this form is to be sent)	
	If well produces oil or liquids,	Unit Sec. Twp. Rgs.	Is gas actually connected? Whe	n	
	give location of tanks.	12 17 9			
	this production is commingled with that from any other lease or pool, give commingling order number:				
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completio	n - (X) X	x		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	2/20/67	6/1/67	1710	1659 Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.) 6989 Gr.	Name of Producing Formation South Hospah Lower Sar	Top Oil/Gas Pay	1559	
	Perforations	South Rospan Bower our		Depth Casing Shoe	
1584				1694	
	1384	TUBING, CASING, AND	CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	15	10-3/4	45	50	
	8-3/4	7	1694	75	
	The state of the s	D ATTOWART (Test must be co	free recovery of total volume of load oil t	and must be equal to or exceed top allow	
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 to able for this depth or be for full 24 hours)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	i, etc.)	
	6/7/67	6/7/67	Pmpg	Choke Size	
	Length of Test	Tubing Pressure	Casing Pressure	244	
	24 hrs Actual Prod. During Teet	Oil-Bhis.	Water - Bbls.	Ges-MCF	
	Walter Lies Person 1 and	35 BOPD	0		
GAS WELL			T# 44		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
		Contract of the Act	Casing Pressure (Shut-in)	Choke Size	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Onsul Liasama (Suaran)		
w	CERTIFICATE OF COMPLIANCE		OIL CONSERVA	TION COMMISSION	
₩.	CENTIFICATE OF COMPENSAGE		JUN 12 1967		
	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.		Original Signed by A. R. Kendrick TITLE PETROLEUM ENGINEER DIST. NO. 5 This form is to be filed in compliance with RULE 1104.		
	m. L. Stagnes		TANKS to a compact for ellow	while for a newly drilled or deepened	
	M. K. Wagner (Stanature) June 9, 1967 (Title)		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 transporten or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.		