	K	7.	/
NO. OF COPIES RECEIVED	NEW VENUE OF CO. O. C.	NSERVATION COMMISSION N	\\ Form C-104
SANTA FE		OR ALLOWABLE	Supersedes Old C-101 and C-1
FILE /	REGOLOTT	AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRAN	NSPORT OIL AND NATURAL G	AS COUNTY
LAND OFFICE			PH HIVE
TRANSPORTER OIL			WEDTIATO!
OPERATOR 3			IAM 1 TO 1
PRORATION OFFICE			JAN 1 5 1969
Operator			OIL CON. COM.
TENNECO OILCOMPANY			DIST. 3
Address	Building, Denver, Color	ado 80203	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry Gas		ONLY
Change in Ownership	Casinghead Gas Condens	sate [_]	
If change of ownership give name and address of previous owner	Formerly Hospah A#7		
DESCRIPTION OF WELL AND	LÈASE	armation Vind of Leas	e Lease No.
Lease Name	Well No. Pool Name. Inc. Marie	. //	e Ledse No.
South Hospah Unit	23 50. Hospa	52nd	FED WY COTTOO
Location K . 165	Feet From The South Line	e and 1800 Feet From	The West
Unit Letter : 10	Feet From The	e unu	
Line of Section 12 To	wnship 17N Range	90 , ммрм, Мс	Kinley County
Shell Oil Company Name of Authorized Transporter of Ca	singhead Gas or Dry Gas Unit Sec. Twp. Rge.		S. Farmington, New Mexic wed copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	F 12 17N 9N		
If this production is commingled wi . COMPLETION DATA	th that from any other lease or pool,		
Designate Type of Completi	on - (X) Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D. 2490'
12-7-68	1-4-69	2190 2968 Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.) 7088 GR	Name of Producing Formation South Hospah Upper Gal.	1	1675'
Perforations	Boden nospan opper data		Depth Casing Shoe
1685-94', 1697-17	01', 1704-08, 1710-14, 1	hole/ft	
	TUBING, CASING, AN	D CEMENTING RECORD	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	70 sx cement
10-3/4"	8-5/8" (20#) 4-1/2" (11.6#)	294'	245 sx cement
6-3/4:	23/9	1675	
<u> </u>			
. TEST DATA AND REQUEST I	able for this d	lepth or be for full 24 hours)	il and must be equal to or exceed top ali
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	
1-4-69	1-4-69	Pumping - 2-1/2" Ins	Choke Size
Length of Test	Tubing Pressure		
24 hours Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF
8 BO	8	36	TSTM
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Testing Method (pitot, back pr.)	I don't Liesane (Sugs-In)		
TI. CERTIFICATE OF COMPLIA			VATION COMMISSION JAN 1 5 1959
	d regulations of the Oil Conservation I with and that the information given the best of my knowledge and belief	n Chiainal Cianad ba	*

Production Clerk

1-31-69

(Title)

(Date)

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.

SUPERVISOR DIST. #3

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.

e N