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
Suite 1200 Lincoln Tower Building, Denver, Colorado 80203

Reason(s) for filing *(Check proper box)*

New Well	[X]	
Recompletion	[ ]	
Change in Ownership	[ ]	

Change in Transporter of:
Oil [ ]   Dry Gas [ ]
Casinghead Gas [ ]   Condensate [ ]

Other *(Please explain)*
To move approximately 3000 Bbls. only
during testing operations

If change of ownership give name
and address of previous owner ___

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
SFP-RR	1	Undesignated Dakota	State, Federal or Fee Fee	

Location

Unit Letter __J__ ; __1980__ Feet From The __South__ Line and __1980__ Feet From The __East__

Line of Section __13__ Township __17__ Range __9__ , NMPM, __McKinley__ County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]	Address *(Give address to which approved copy of this form is to be sent)*
The Permian Corporation	200 B Petroleum Blaza, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [ ] None	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	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	13	17	9	None	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
7-15-70	---	2790	2760

Elevations *(DF, RKB, RT, GR, etc.)*	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Dakota		

Perforations		Depth Casing Shoe
2714'-20'		

TUBING, CASING, AND CEMENTING RECORD

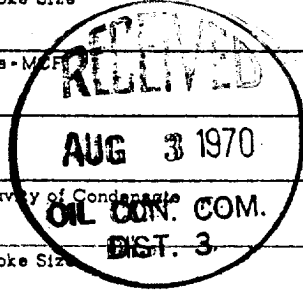| HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4	8-5/8	76'	50
7-7/8	5-1/2	2790'	300

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	Date of Test	Producing Method *(Flow, pump, gas lift, etc.)*	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

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 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)
Senior Production Clerk
(Title)

7-30-70
(Date)

RECEIVED
AUG 3 1970
OIL CON. COM.
DIST. 3

OIL CONSERVATION COMMISSION AUG 3 1970

APPROVED ___, 19 ___

BY Original Signed by Emery C. Arnold

TITLE SUPERVISOR DIST. #3

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