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<u>一</u> .		OIL	1							
	TRANSPORTER	GAS								
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TENNECO OIL COMPANY										
Address										
	Suite 1200 Lincoln Tower Building, Denver									
	Suite 1200) Line	coli	n Tow	er E	Building	g. Denv	er.		
R					er E	Building	g, Denv	er		
	Suite 1200 eason(s) for filing ew Well					Building				
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N R	eason(s) for filing ew Well	(Check			Ch Oil	ange in Trai	nsporter of	:		
R C If an	eason(s) for filing lew Well ecompletion	Check I	e nar	box)	Ch Oil Ca	ange in Tran	nsporter of	: Dr		
N R C If an	eason(s) for filing lew Well ecompletion hange in Ownership change of owners diaddress of prev	Check I	e nar	box)	Ch Oil Ca	ange in Tran	nsporter of	: Dr Co		
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IL CONSERVATION COMMISSION EST FOR ALLOWABLE AND

aco Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

	U.S.G.S. LAND OFFICE TRANSPORTER OIL / GAS OPERATOR PRORATION OFFICE									
1.	Operator TENNECO OIL COMPANY									
	Address	wer Building, Denver, Co	olorado 80203 Other (Please explain)							
	New Well Recompletion Change in Ownership If change of ownership give name	Change in Transporter of: Oil X Dry Ga: Casinghead Gas Conden								
	and address of previous owner			00.0400.0405						
11.	DESCRIPTION OF WELL AND I		14-20-0603-9895 e, Including Formation Kind of Lease							
	YAZZIE Location	2 Unde	esignated Dakota	State, Federal or Fee Ind						
	Unit Letter H ; 170	O Feet From The North Line	se and Feet From 7	The East						
	Line of Section 18 Tow	nship 17N Range	8W , NMPM,	McKinley County						
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	as							
ļ	Name of Authorized Transporter of Oil		Address (Give address to which approx Box 3119, Midland, Texa							
	Western Oil Transportat	Inghead Gas or Dry Gas	Address (Give address to which approx	ped copy of this form is to be sent)						
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. H 18 17 8	Is gas actually connected? Whe	OIL CON COM						
	If this production is commingled with COMPLETION DATA	n that from any other lease or pool,	give commingling order number:	DIST. 3						
	Designate Type of Completio	n = (X) Oll Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.						
	Date Spudded 11-25-70	Date Compl. Ready to Prod. 12-1-70	Total Depth 2850	P.B.T.D. 2840						
	Elevations (DF, RKB, RT, GR, etc.) 6985 GR	Name of Producing Formation Dakota	Top Oil/Gas Pay 2610	Tubing Depth 2733						
	Perforations	Darota	2010	Depth Casing Shoe						
		TUBING, CASING, AND CEMENTING RECORD								
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	sacks cement 40 sacks circulated						
	12 - 1/4 7 - 7/8	8-5/8" 5-1/2"	76 2850	300 sacks						
	7-17-5									
•	THE DAMA AND DECUTED E	DRALLOWARIE WELL THE LANGE LAN	often recovery of total values of land oil	and must be equal to at exceed top allow-						
٧.	TEST DATA AND REQUEST FOR ALLOWABLE 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 Cil Bun To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)									
	Date First New Cil Run To Tanks Date of Test 12-2-70		Flowing							
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size 14/64						
	24 hrs. Actual Prod. During Test	300 Oil-Bbis.	Water-Bbls.	Gas-MCF						
	122	114	8	140						
	GAS WELL									
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate						
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size						
VI.	CERTIFICATE OF COMPLIANO	DE .	OIL CONSERVATION COMMISSION APPROVED DEC 7 1970 . 19							
	I hereby certify that the rules and r Commission have been complied w above is true and complete to the	with and that the information given	APPROVED UEC 7 1970 , 19 Disciplinal Signed by Emery C. Arnolo BY TITLE SUPERVISOR DIST. #8 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, and the complete or condition.							
	//									
	SAL									
	Sr. Production Clerk	ature)								
	12-3-70	:le)								
		ite)	well name or number, or transpor	it. III, and VI for changes of owner, eter, or other such change of condition. St be filed for each pool in multiply						