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SANTA FE	1		
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LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	1	
OPERATOR	1		
BEODATION OF			

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110

	FILE	′	4		AND			Effective 1-1-6	55		
	U.S.G.S.]	AUTHORIZATION TO TRAI	NSPORT	OIL AND N	ATURAL G	AS			
	LAND OFFICE										
	TRANSPORTER OIL										
	GAS	4		•							
	OPERATOR		\dashv								
1.	PRORATION OFFICE Operator										
	Tesoro Petroleum Corporation										
	Address										
	8520 Crownhill, San Antonio, Texas 78209										
	Reason(s) for filing (Check proper box) Other (Please explain)										
	New Well Change in Transporter of:										
Recompletion Oil Dry Gas											
	Change in Ownership			Casinghead Gas 🙋 Condens	sate	addias	Casia	Med Tran	soule		
	76 -l 6						1				
	If change of ownership give and address of previous own		= 								
II.	DESCRIPTION OF WELL	L AN	DI	Well No. Pool Name, Including Fo	rmation		Kind of Lease		Lease No.		
	Lease Name					į	State, Federal	5	Lease No.		
	Santa Fe R.R.			27 Lone Pine - Da	kota "	<u>D., </u>		Fee_	_l		
			1 7 7	10 Cauth	. 9	210		. Wost			
	Unit Letter K	;	1/.	10 Feet From The South Line	e and	310	_ Feet From T	he West			
	Line of Section 7		Tow	nship 17N Range 81	W	, NMPM,	McKin]	lev	County		
	Line of Section /		10	The state of the s		, , , , , , , , , , , , , , , , , , , ,		J			
m.	DESIGNATION OF TRAI	NSPO	RT	ER OF OIL AND NATURAL GAS	s						
	Name of Authorized Transport	ter of	011	X or Condensate	Address			ed copy of this form is	to be sent)		
	Shell Pipe Line							n, New Mexico			
	Name of Authorized Transport	ter of	Casi	inghead Gas 🛣 or Dry Gas 🦳	Address (Give address to which approved copy of this form is to be sent)				i		
	Tenneco Oil Comp	pany	•					g., Denver, Col	lo. 80203		
	If well produces oil or liquids	3,		Unit Sec. Twp. Rge.	1	tually connected	•				
	give location of tanks.			D 7 17N 8W	ro Ten	neco's pla	ant !	10-15-71			
	If this production is commin	ngled	with	h that from any other lease or pool, a	give com	mingling order	number:	PC-365 (as ame	ended)		
IV.	COMPLETION DATA			Oil Well Gas Well	New Well	Workover	Deepen	Plug Back Same Re	s'v. Diff. Res'v.		
	Designate Type of Co	omple	tio		''\' '' '' '' '' '' '' '' '' '' '' '' '	1	1		1		
	Date Spudded			Date Compl. Ready to Prod.	Total De	pth	1	P.B.T.D.			
	Date spaces										
	Elevations (DF, RKB, RT, G	R, etc.	.;	Name of Producing Formation	Top Oil/	Gas Pay		Tubing Depth	······································		
		•	1								
	Perforations							Depth Casing Shoe			
				TUBING, CASING, AND							
	HOLE SIZE			CASING & TUBING SIZE		DEPTH SE	T	SACKS CEMENT			
					-						
					 						
					 -				·		
		·500		DAYYOWADI E	<u> </u>		a of land all		ton allow-		
٧.	TEST DATA AND REQU	FSI	PC	able for this de:	pth or be j	for full 24 hours)	18 0) 1000 011	and must be equal to a			
	Date First New Oil Run To T	anks		Date of Test	Producir	ng Method (Flow,	pump, gas lij	t, etc.)	TYFN		
								, LU			
Length of Test Tubing Pressure				Tubing Pressure	Casing F	Stessme		Choke Size	7 107e		
					<u> </u>	 		Gas-MCP 2012			
	Actual Prod. During Test			Oil-Bbis.	Water-B	DIS.		Can-Mosal Scar	OOM,		
				<u> </u>			T 431	3			
								The section of the se	. ستنصب		
	GAS WELL Actual Prod. Test-MCF/D Length of Test					ondensate/MMCF		Gravity of Condensate			
	Actual Ploa. 1001-MC1/D										
	Testing Method (pitot, back)	pr.)		Tubing Pressure (shut-in)	Casing I	Pressure (Shut-	in)	Choke Size			
						_					
VI	CERTIFICATE OF COM	DI I	ANC	TEC .		OIL C	ONSERVA	TION COMMISSIO	N		
V 1.	CERTIFICATE OF COM	II LI	2110	~	DEC 2 7 1971						
	I hereby certify that the ru	ies s	nd r	egulations of the Oil Conservation	AFFROVED						
	Commission have been complied with and that the information given					By Original Signed by Emery C. Arnold					
above is true and complete to the best of my knowledge and belief.					SUPERVISOR						
					TITLE SUPERVISÇE PIDI. #0						
A Schimming					This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened						
									R. H. Denman (Signature)		
Manager of Production Engineering					tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-						
	(Title)					able on new and recompleted wells.					
	December 16, 197			Fill out only Sections I, II, III, and VI for changes of owner,							
(Date)						well name or number, or transporter, or other such change of condition.					

(Date)

Separate Forms C-104 must be filed for each pool in multiply completed wells.