NO. OF COPIES RECEIVE	0   5						
DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION R					
SANTA FE	-	REQUEST FOR ALLOWABLE					
FILE	1/12			AND		Ε	
U.S.G.S.	77	AUTHOR	IZATION TO T	RANSPORT OF	L AND NATHE	PALIGAS A	
LAND OFFICE		7.5 17.5				1/2	
	11.					ųO	
TRANSPORTER G	AS						
OPERATOR	2						
PRORATION OFFIC						/	
Operator Tenneco Oil						1	
Address Suite 1200	Lincoln To	wer Build	ing, Denver	, Colorado	80203	M	
Reasons portiling (Ch	eck proper box)			Otl	ner (Please explain	OiL	
New Well	Q .	Change in T	ransporter of:	İ		OIL	
Recompletion	<b>1</b> .	Oil	Dry	Gas			
Change in Ownership	1	Casinghead	Gas Cor	ndensate			
If change of ownership and address of previous DESCRIPTION OF	is owner	CASE				00-C-14-20-	
Lease Name		Well No. F	ool Name, Includin			f Lease	
Kagoso		2	Lone Pine	Dakota "D'	State,	Federal or Fee F	
Location I Unit Letter	2970	Feet From	The North	Line and 890	) Feet	From The Eas	
Line of Section	18 Towns	hip 17	Range	8	, имрм,	McKinle	
I. DESIGNATION OF	TRANSPORTE	R OF OIL A	ND NATURAL	GAS	ve address to which	h approved conv o	

or Dry Gas

Twp.

17

Shell Pipe Line Corporation Name of Authorized Transporter of Casinghead Gas

Designate Type of Completion - (X)

2743-2746 with 2 shots per foot

V. TEST DATA AND REQUEST FOR ALLOWABLE

If well produces oil or liquids, give location of tanks.

IV. COMPLETION DATA

2-24-71

6953 GR

Elevations (DF, RKB, RT, GR, etc.)

HOLE SIZE

12-1/4"

7-7/8

Date First New Oil Run To Tanks

Date Spudded

Perforations

OIL WELL

Length of Test

**GAS WELL** 

3-11-71

24 hours

Actual Prod. During Test

Actual Prod. Test-MCF/D

3-17-71

Testing Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

Sr. Production Clerk

370

Unit

I

Sec.

If this production is commingled with that from any other lease or pool, give commingling order number:

Oil Well

Х Date Compl. Ready to Prod.

Name of Producing Formation

8-5/8

5 - 1/2

Date of Test

3-14-71

Tubing Pressure

None Oil-Bbls.

Length of Test

Tubing Pressure (Shut-in)

61

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.

(Title)

(Date)

CASING & TUBING SIZE

3-11-71

Dakota

brm C-104 Hective 1-1-65

upersedes Old C-104 and C-110

	TOTAL.						
			/ RILLIV				
Denver, (	Colorado 80203		MAR 19 19	71			
	Other (Please	e explain)	VOIL CON OR				
rter of:	. [	OIL COM. COM. DIST. 3					
Dry Gas	77		101.3	/			
			•				
		Noo-C-	14-20-2666				
me, Including Fo		Kind of Lease No.					
ne Pine Da	akota "D"	State, Federal or Fee Federal					
orth Line and 890 Feet From The East							
Range 8	, NMPN	a, <u>M</u>	cKinley	County			
ATURAL GA	S Address (Give address	to which approv	ed copy of this form is to	be sent)			
• 🗀	l			I			
805 W. Municipal Dr., Farmington, N. M.  Address (Give address to which approved copy of this form is to be se							
, 545							
vp. P.ge.	Is gas actually connect	ed? Whe	'n				
7 8	No						
lease or pool.	give commingling orde	r number:					
		<del></del>					
Gas Well	New Well Workover	Deepen	Plug Back   Same Res	v. Din. Hes.v.			
!	X		<u> </u>				
Prod.	Total Depth		P.B.T.D.				
	2810		2800				
rmation	Top Oil/Gas Pay		Tubing Depth				
2736		2739					
		Depth Casing Shoe					
			2810				
	CEMENTING RECO		SACKS CEM	FNT			
ING SIZE	DEPTH S	) C. I	<del></del>				
76			40 sacks circulated				
2810			300 sacks				
	<del>                                     </del>		<del> </del>				
(Test must be a	ifter recovery of total vol epth or be for full 24 how	ume of load oil	and must be equal to or e	xceed top allow-			
Producing Method (Flow, pump, gas lift, etc.)							
Pumping		<del></del>	Choke Size				
	Casing Pressure		CHOLY SIZE				
	None		None Gas-MCF				
	Water - Bbls.		j.				
	309		19				

OIL CONSERVATION COMMISSION 19 1971 APPROVED\_ By Original Signed by Emery C. Arnold SUPERVISOR DID II 器 TITLE . This form is to be filed in compliance with RULE 1104.

Gravity of Condensate

Choke Size

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 completed wells.

TUBING, CASING, AND CEMENTING RECORD

Bbls. Condensate/MMCF

Casing Pressure (Shut-in)