'/	1	:	
NO. DE COPIES NECESIO			₩.
DISTRIBUTION	NEW MEXICO OIL CO	DRIVERVATION COMMISSION	Form C-104
SANTATE	/ REQUEST I	FOR ALLOWABLE	Supersedes Old C-101 and C-11 Effective 1-1-65
FILE		AND	Flightline 1-1-02
u.s.c.s.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GAS	\$
LAND OFFICE	7.6 (1.6.1.2.1.1.7.1.1.2.1.1.1.1.1.1.1.1.1.1.1.1	1	
OIL /			
TRANSPORTER GAS		•	
OPERATOR 7			
PRORATION OFFICE			
Operator			
Tenneco Oil	Company		
Address		. •0.	
Suite 1200 Lincoln	Tower Bldg Denver,	Colorado 80203	
Reason(s) for filing (Check proper box)		Other (Prease explain)	
New Well	Change in Transporter of:	Change of authori	zed transporter.of
Recompletion	Oil Dry Ga	condensate only.	
Change in Ownership	Casinghead Gas . Conder	Effective 3/13/	70
ounds at ourseast.	-		
f change of ownership give name	•	• •	
nd address of previous owner			•
CONTROLL OF MALE AND S	EACE		
DESCRIPTION OF WELL AND I	Well No. Pool Name, Including F	ormation Kind of Lease	Lease No.
	9 Tobarato	State, Federal	or Fee
JiCaRilla H	To haliacita		•
· · · · · · · · · · · · · · · · · · ·		ne and 1850 Feet From Th	F
Unit Letter 79	Feet From The N Lie	he and	
10 -	mship 26 N Range	5W NMPM, RIC	Arriba county
Line of Section 7	mship 26 /V hange		
	one of our AND NATIONS C.		•
DESIGNATION OF TRANSPORT	or Condensate XX	Address (Give address to which approve	ed copy of this form is to be sent)
Name of Authorized Transporter of Oil	O' Couracionate MA		
Plateau, Inc.	· · · · · · · · · · · · · · · · · · ·	P. O. Box 108 - Farini Address (Give address to which approve	ed copy of this form is to be sent)
Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (blue desired to the state of	:
	;	Is gas actually connected? When	n
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	is gas actuarly connected.	
give location of tanks.			
If this production is commingled wi	th that from any other lease or pool	, give commingling order number:	
COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'
Designate Type of Completi-		Idea nett norvotet	
Designate Type of Completi-		5	P.B.T.D.
Date Spudded	Date Compl. Ready to Prod.	Total Depth •	. 10,110
			Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	I find Depth
			Depth Casing Shoe
Perforations			Deptit Casing bilde
	· · · · · · · · · · · · · · · · · · ·		
	TUBING, CASING, A	ND CEMENTING RECORD	CONT.
HOLE SIZE	CASING & TUBING SIZE	. DEPTH SET	SAUKE CEMENT
			MAR 20 1970
Process of the Arrange of the Arrang	TARREST TARREST	e after recovery of total volume of load off	What will be GONb of exceed top at
TEST DATA AND REQUEST I	oble for this	depth or be for full 24 hours?	1331 3
OIL WELL Date First New OI: Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	111-40.)
1500	Tubing Pressure	Casing Pressure	Choke Size
Length of Test			
The state of the s	0(1 · Bb!s.	Water-Bbls.	Gas-MOF
Actual Prod. During Test			•
	•	•	
GAS WELL	Length of Test	Bbls. Condensate/AMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Dong.ii or 100		
	Tubing Pressure (Shub-in)	Cosing Pressure (Shvb-in)	Choke Size
Testing Mothed (pitot, back pr.)	I tentile cicanma (princes)	•	i

VI. CERTIFICATE OF COMPLIANCE

OIL CONSERVATION COMMISSION

MAR 2 0 1970

APPROVED

ByOriginal Signed by Emery C. Arnold

SUPERVISOR DIST. 35

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or descent well, this form must be accompanied by a tabulation of the devices tests taken on the well in recordance with RULE 111. All sections of this form must be filled out completely for all to white on new read recompleted wills.

Sr. Production Clark

G. A. Ford

17 ale)

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.