	DISTRIBUTION SANTA FE	INSERVATION COMMIS OR ALLOWABLE AND	Effective t t as				
	U.S.G.S,  LAND OFFICE  TRANSPORTER OIL GAS   OPERATOR	AUTHORIZATION TO TRAN	the state of the s	ATURAL GAS .			
I.	PRORATION OFFICE Operator			***			
	Tenneco Oil Company						
	1860 Lincoln St. Suite 1200, Denver, Colorado 80295  eason(s) for filing (Check proper box)  Other (Please explain)						
	New Well  Recompletion  Change in Ownership	Change in Transporter of:  Oil Dry Gas  Casinghead Gas Condens	FI.				
	If change of ownership give name			-			
	DESCRIPTION OF WELL AND L	FACE		*N00-C-	14-20-3615		
11.	Lease Name Canyon  Well No. Pool Name, Including F		Mation Kind of Lease State, Federal or Fee			Lease No.	
	Location Unit Letter P ; 790	Feet From The South Line	and 1100	Feet From The	West		
	Line of Section 13 Town	nship 25[  Range 1	IW , NMPM,	San Juai	n .	County	
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	5				
	Name of Authorized Transporter of Oil or Condensate X  Thriftway		Address (Give address to which approved copy of this form is to be sent)  P.O. Box 1367, Farmington, N.M. 87401				
	Name of Authorized Transporter of Casinghead Gas or Dry Gas XX  Gas Company of New Mexico		Address (Give address to which approved copy of this form is to be sent)  BOX 750, Farmington, N.M. 87401				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge. P 13 25N 11W	Is gas actually connected NO	when Near	Future		
IV.	If this production is commingled with COMPLETION DATA				Back   Same Resty		
	Designate Type of Completion		X Workover		t t	Ditt. Res.v.	
	Date Spudded 10-22-76	Date Compl. Ready to Prod. 12-15-76	Total Depth 6105.	P.B.	T.D.		
	Elevations (DF, RKB, RT, GR, ezc.) 6443 GL	Name of Producing Formation  Basin Dakota	Top Oll/Gas Pay	Tubi	ng Depth 5920'		
	Perforations 2 JSPF From 5952'-5924'						
		TUBING, CASING, AND					
	HOLE SIZE	CASING & TUBING SIZE	301'	T	SACKS CEME 275 Sacks	NT	
	12-1/2" 7-7/8"	8-5/8" Casing 5-1/2" Casing			325 Sacks		
	7-1/8	2-3/8" Tubing					
v.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be again to a 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	Cho	com.		
	Actual Prod. During Test	Otl-Bbls.	Water-Bbla.	Gan	-MCF,CYC, 3		
	GAS WELL			1000			
	Actual Prod. Test-MCF/D	Length of Test	Bbla. Condensate/MMCF	Gra	vity of Condenacte -0-	1	
	17604 AOF Testing Method (pitot, back pr.)	3 Hours Tubing Pressure (Shut-in)	Casing Pressure [Shut-	-in) Cho	%+ Siz+ 3/4"		
***	Back Pressure 1997 ERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION				
¥1.			APPROVED		7	9	
	I hereby certify that the rules and r Commission have been complied wabove is true and complete to the	with and that the informalion given	11				
			BY Original Signed by A. R. Yendrick TITLE				
	D.D. Pomers		This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation				
	Division Production Manager  (Title)		All sections of this form must be filled out completely for allowable on new and recompleted walls.				
		(Date)		well name or number, or transporter, or other such change of condition.  Separate Forms C-104 must be filed for each pool in multiply			
						NA FUZ	