ì	NO. OF COPIES RECEIVED			•
	DISTRIBUTION	NEW MEXICO OU CO	SISERVATION COMMISSION	Form C-104
	SANTAFE	1	FOR ALLOWABLE	Supersedes Old C-104 and C-11
	FILE	, REGULST I	AND	Uffective 1-1-65
1		AUTHODIZATION TO TOAN		`A C
	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
	OIL 7			
	TRANSPORTER	-		
	GAS /	4		
	OPERATOR /			
Ι.,	Cperator			
	Tenneco Oil Company			
	Address			
	Box 1714, Durango, Colorado			
	Reason(s) for filing (Check proper box)  Other (Please explain)			
	New Well Change in Transporter of: Effective 1st delivery.			
	Recompletion Oil Dry Gas  Casinghead Gas Condensate			
	Change in Ownership	Casinghead Gas Condens	sate	
	if change of ownership give name			
	and address of previous owner			
II.	DESCRIPTION OF WELL AND	LEASE   Well No.   Pool Nam	ne, Including Formation	Kind of Lease
	Lease Name	6	Dakota	State, Federal or Fee Federal
	Schwerdtfeger A		Dakota	
	N 70	O Feet From The SO Line	, and 1715 Feet From	The West
	Unit Letter 19	Feet From The	and	
	Line of Section 8 , To	wnship 27-N Range	8-W , NMPM, Sar	Juan County
			_	
III.	Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GAS	Address (Give address to which appro	ved copy of this form is to be sent)
		<u> </u>	Farmington, New Mexic	
	Permian (formerly McW Name of Authorized Transporter of Ca	singhead Gas or Dry Gas X	Address (Give address to which appro	wed copy of this form is to be sent)
	El Paso Natural Gas C		11 11 11	
		Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en
	If well produces oil or liquids, give location of tanks.	N 8 27 8	No	on approval
	If this production is commingled wi	th that from any other lease or pool,	give commingling order number:	
	COMPLITION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.			
	Designate Type of Completi-	<b></b>	x	
	Date Spud led	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	7-6-66	8-5-66	7508	7464
	Peol	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	6761 GR	Dakota	7235	7229
	Perforations			Depth Casing Shoe
			CEMENTING RECORD	SACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	250 sx
	12 1/2	8 5/8	1030 7504	3 stages-905 sx
	7 7/8	4 3	7504	J S COG CS = JO J MAIL
v.		2 3/8	7229	
	TEST DATA AND REQUEST F	COD AT LOWARIE (Test must be at	fter recovery of total volume of load oil	and must be equal to or exceed top allow
	OIL WELL able for this depth or be for full 24 hours)			ift. etc.)
	Date First New Oil Run To Tanks	Date of Test	Producing Method (1 100), pump, 200	CEP-II/EN
		Tubing Pressure	Casing Pressure	Choye Rd
	Length of Test	I uping Pressure		/ 1255
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Ga -MCTEB 28 1967
	Actual Frod. During Test			OIL CON. COM.
	1			DIST. 3
	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	6927	3 hrs.	Casing Pressure	Choke Size
	Testing Method (pitot, back pr.)	Tubing Pressure		3/4
	AOF Back PR	436	993 OH CONSERV	ATION COMMISSION
VI	. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION FEB 28 1967	
	Y hands positive that the rules and regulations of the Oil Conservation		APPROVED FED NO	
	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.		BY Original Signed by Emery C. Arnold	
			TITLE SUPERVISOR DIST. #3	
	and the first of the second of the second		This form is to be filed in compliance with RULE 1104.	
	Harold C. Nichols		It ship is a request for allowable for a newly drilled or deepene	
	(Signature)		well, this form must be accompanied by a tabulation of the deviatic	

Senior Production Clerk

(Title) 2/22/67

(Date)

If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviatic tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow able on new and recompleted wells. Fill out Sections I, II, III, and VI only for changes of owne well name or number, or transporter, or other such change of conditions. Separate Forms C-104 must be filed for each pool in multip