	NO. OF CEPIES RECEIVED 1 51			
	DISTRIBUTION	NEW MEXICO OIL CO	NSERVATION COMMISSION	Form C-104
-	SANTA FE /	REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65
ŀ	U.S.G.S.	ALITHORIZATION TO TRAN	AND ISPORT OIL AND NATURAL GAS	
Ì	LAND OFFICE	AUTHORIZATION TO TRAI	ON ON ONE AND INCIONAL GAR	
	TRANSPORTER OIL /			
- }	OPERATOR 2			
. }	PROPATION OFFICE			
*	Operator			
ļ	Tenneco Oil Compa	ny		
	Address	morrom Dida Dansson G	-1 80202	İ
	Reason(s) for filing (Check proper box)	n Tower Bldg., Denver, Co	Other (Please explain)	
	New Weil	Change in Transporter of:	<u> </u>	
	Recompletion	Oil Dry Gas Casinghead Gas Condens	 	}
l	Change in Ownership	Casingheda Gas Condens		
	If change of ownership give name and address of previous owner			
II.	DESCRIPTION OF WELL AND I	LEASE	rmation Kind of Lease	I-149-IND-7971
	Lease Name	Well No. Pool Name, including For	Ct Cadaral as	1 -
	Gallegos Location	7 Basin Dakota	1	mutan
	- · ·	75 Feet From The North Line	and 1600 Feet From The	West
	Onit Letter,,			
	Line of Section 34 Tow	mship 26N Range]]	W , NMPM, Sa	n Juan County
111.	DESIGNATION OF TRANSPORT	or Condensate	S Address (Give address to which approved	copy of this form is to be sent)
		o, condensate 22	2011 E. Main. Farmington	. New Mexico 87401
	Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)			copy of this form is to be sent)
	Not Dedicated		Is gas actually connected? When	
	If well produces oil or liquids,	Unit Sec. Twp. Age.	4	on Dedication
	give location of tanks.	C 34 26 11 th that from any other lease or pool, a		
IV.	COMPLETION DATA			Plug Back Same Resty. Diff. Resty.
	Designate Type of Completic		New Well Workover Deepen F	t I
	Date Spudded	Date Compl. Ready to Prod.		P.B.T.D.
	10/30/73	12/4/73	5950'	5918'
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth 5845
	6202.0' GR	Basin Dakota		Depth Casing Shos
	Perforations 5888* - 5904*			
		TUBING, CASING, AND	CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE 8-5/8"	618' 3	SACKS CEMENT 50 SX C1 "A" W/2% CaC12
	12-1/4" 7-7/8"	0-5/0" 5-1/2"	5950' S	stage 1; 300 sx Cl "A"
	1-1/0)-1/6	2% BJ lowden	se foll. by 100 sx late
			Stage 2: 280	sx Cl "A" + 2% BJ low-
V.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable able for this depth or be for full 24 hours)			
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift,	etc.)
				Chok Si PIVI
	Length of Test	Tubing Pressure	Casing Pressure	WELL IN
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	DEC 14 1973
	OIL CON. COM.			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/XXXX	Gravity of Condensale
	980	24 Hr. Tubing Pressure (Shut-in)	192	Choke Size
	Testing Method (pitot, back pr.)	· ·	Cdamy Fishaut (Care and)	Chore Size
	Back Pr.	1825 psi	1800 psi	TION COMMISSION
VI	. CERTIFICATE OF COMPLIAN	UE	UIL CONSERVA	K073
			11	131 -9
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED DEC 14	19
		regulations of the Oil Conservation with and that the information given e best of my knowledge and belief.	Original Signed by	mery C. Allioid
		regulations of the Oil Conservation with and that the information given e best of my knowledge and belief.	I version Signed by I	mery C. Allioid

Production Clerk

12/11/73

(Title)

(Date)

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

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