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	NO. OF COPIES RECEIVED	1		
DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION For				Form C-104
	SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-110
	FILE		AND	Effective 1-1-65
	U.S.G.S.	1 AUTHORIZATION TO TRA	NSPORT OIL AND NATURALIS	LE A FREE B
	LAND OFFICE	, NOTITION TO THE	MOTOR TOLL AND MATORAGE	MEGELIEN
	TRANSPORTER OIL	1	· · · · · · · · · · · · · · · · · · ·	
	THANSPORTER GAS	1	ئے ہیں	1AN 6 1093
	OPERATOR	1		JAN 61983
	PRORATION OFFICE	1	م	WE CON! DIV!
I.	Operator	<u></u>	`	ML CON. DIV.
	Tenneco Oil Company DIST. 3			
	Address	orr company		
		Figlewood, CO 80155		
ł	Reason(s) for filing (Check proper box)		TOL - (Place evaloin)	
			Other (Please explain)	i
	New We!!	Change in Transporter of:		
	Recompletion	Oil Dry Gas	=	ļ.
	Change in Ownership	Casinghead Gas Condens	sate	
	If change of ownership give name and address of previous owner DESCRIPTION OF WELL AND I		- Vied of Legen	
	Lease Name	Well No. Pool Name, Including Fo	· · · · · · · · · · · · · · · · · · ·	reueral costs
	Tapp	1E Basin Dakota	State, Federal	or Fee NM-012200
	Location			
	Unit Letter P 995	5 Feet From The South Line	e and 1110 Feet From T	_{h•} East
	Unit Letter	Pett rom ins	• ana	ne
	Line of Section 21 Tow	wnship 28N Range	8W , NMPM,	San Juan county
m.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS	s	
_	Name of Authorized Transporter of Oil	or Condensate XX	Address (Give address to which approve	ed copy of this form is to be sent)
1	Giant Refining		Box 256, Farmington	n. NM 87401
{	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas X	Address (Give address to which approve	ed copy of this form is to be sent)
1	El Paso Natural		Box 990, Farmington	
I		Unit Sec. Twp. Rge.	Is gas actually connected? When	
1	If well produces oil or liquids,	P 21 28N 8W	No I when	ASAP
ı	give location of tanks.		1	
	COMPLETION DATA	th that from any other lease or pool, g	give commingling order number: New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completio	/V) 1)	Plug Buck Same 1.52
			X	
1	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
j	11/11/82	12/29/82	6900' KB	6891' KB
1	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth
	5969' GR	Dakota	6678' KB	6798' KB
ł	Perforations		0070 150	Depth Casing Shoe
	6678-84' KB, 6758-62' KB, 6828-36' KB, 6868-78' KB, 6885-89' KB			
- 1	0070-04 ND, 0.0	TUBING, CASING, AND		<u> </u>
ł			DEPTH SET	SACKS CEMENT
ł	HOLE SIZE	CASING & TUBING SIZE		
	12-1/4"	9-5/8", 40#	310' KB	295 CF
	8-3/4"	7", 23#	3052' KB	923 CF
	6-1/4"	4-1/2". 10.5#	6900' KB	750 CF
1		2-3/8"	6798' KB	<u>i</u>
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be aft	fter recovery of total volume of load oil a	ind must be equal to or exceed top allow-
	OIL WELL	able for this der	pth or be for full 24 hours)	
i	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas life	, etc.)
	<u> </u>	1		
Ì	Length of Teet	Tubing Pressure	Casing Pressure	Choke Size
ŀ	Actual Prod. During Test	Oil-Bble.	Water - Bbls.	Gae - MCF
l	Actual Prod. During 1981	OII-BDIE.	***************************************	
Į	L		<u> </u>	
	GAS WELL			
[Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
[2470	3 hrs.		-
				f

Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) 3/4" 2125 psi 2125 psi Back pressure

VI. CERTIFICATE OF COMPLIANCE

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.

1 am	(Signature)
June	(Signature)
Production	Analyst
	(Title)
January 3,	1983

(Date)

OIL CONSERVATION COMMISSION

APPROV	/ED	FEB 4 - 1983
BY		Signed by FRICE CHAVEZ
TITLE		SUPERVISOR FIGURES # 3

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