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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-11
Effective 1-1-65

1. Operator Tenneco Oil Company		
Address P. O. Box 1714, Durango, Colorado		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	Effective first delivery
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Michener	Well No. 1	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Fed.
Location			
Unit Letter E	1605 Feet From The North Line and 1085 Feet From The West		
Line or Section 28	Township 28-N	Range 9-W	NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
Permian (Formerly McWood)	P. O. Box 3119, Midland, Texas		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Company	P. O. Box 990, Farmington, New Mexico		
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 28	Twp. 28
	Rge. 9	Is gas actually connected? No	When On Approval

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
		X	X					
Date Spudded 4/4/66	Date Compl. Ready to Prod. 5/11/66	Total Depth 6850		P.B.T.D. 6783				
Pool Dakota	Name of Producing Formation Dakota		Top Oil/Gas Pay 6584		Tubing Depth 6850			
Perforations 6584-6747					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4	8-5/8		278		125 sx			
7-7/8	4-1/2		6845		3 stages 569 sx			
	2-3/8		6741					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or 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	Choke Size
			FEB 28 1967
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
			OIL CON. COM. DIST. 3

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
6982	3 hours	---	---
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
AOF	363	1241	3/4

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.


Harold C. Nichols
Senior Production Clerk

(Title)

February 24, 1967
(Date)

OIL CONSERVATION COMMISSION

APPROVED **FEB 28 1967**, 19

BY **Original Signed by Emery C. Arnold**

TITLE **SUPERVISOR DIST. #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 Sections I, II, III, and VI only 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 completed wells.