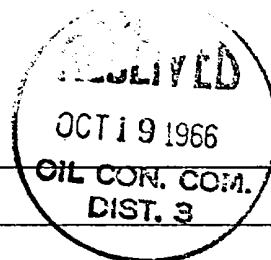


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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65



I. Operator
Tenneco Oil Company
Address
P. O. Box 1714 - Durango, Colorado
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
Request Authority to Transport
Effective First Delivery

If change of ownership give name
and address of previous owner

LANGE
OK [Signature]

II. DESCRIPTION
Lease Name Storey "C"
Lease No. 1
Well No. Basin Dakota
Kind of Lease State, Federal or Fee Federal
Location
Unit Letter P 1515 Feet From The South Line and 1765 Feet From The East
Line of Section 34 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)
McWood Corporation	Box 1702 - Farmington, New Mexico
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	Box 990 - Farmington, New Mexico
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pgs. Is gas actually connected? When
P 34 28 9	No 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'v.	Diff. Res'v.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
10-16-65	12-6-65	7010	6985					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
6375 G.R.	Basin Dakota	6726	6936					
Perforations		Depth Casing Shoe						
6726 - 6965		7010						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	275	150					
7-7/8"	4-1/2"	7010	350 1st stage, 210 second					
	2-3/8"	6936	---					

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
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
2128	3 Hours	---	---
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Back Pr.	141	755	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.

[Signature] Harold C. Nichols

Harold C. Nichols (Signature)
Senior Production Clerk (Title)

October 13, 1966

OIL CONSERVATION COMMISSION

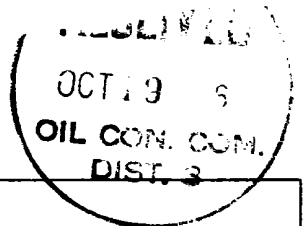
APPROVED OCT 19 1966
BY [Signature]
TITLE SUPERVISOR DIST. #3

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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65



I. Operator
Tenneco Oil Company
Address
P. O. Box 1714 - Durango, Colorado
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
Request Authority to Transport Effective First Delivery

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, Including Formation	Kind of Lease
Storey "C"		1	Basin Dakota	State, Federal or Fee Federal
Location Unit Letter <u>7</u> ; <u>1515</u> Feet From The <u>South</u> Line and <u>1765</u> Feet From The <u>East</u> Line of Section <u>34</u> Township <u>28-N</u> Range <u>9-W</u> , NMPM, <u>San Juan</u> County				

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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
Harold C. Nichols (Signature)
Senior Production Clerk
October 13, 1966
(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 19 1966, 19
BY Original Signed by Emery C. Arnold
SUPERVISOR DIST. #3
TITLE _____

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Separate Forms C-104 must be filed for each pool in multiply completed wells.