			_	
			4	
DISTRIBUTION				
SANTA FE		\Box		
FILE		/	2	
U.S.G.S.				
LAND OFFICE		<u> </u>		
TRANSPORTER	OIL	L	<u> </u>	
	GAS	Γ / Γ		
OPERATOR		3		
PRORATION OFFICE			1	

m.

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

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

TILE / 2	AND		
J.S.G.S.	AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GA	72
AND OFFICE			• .
RANSPORTER GAS			
PRORATION OFFICE		•	
PRORATION OFFICE			•
Tennec	o Oil Company		
ddress .	-	Colorado 80203	
Suite 1200 Lincoln eason(s) for filing (Check proper box)	Tower Bldg. Denver, (Other (Please explain)	
leason(s) for filing (Check proper box) lew Well	Change in Transporter of:	From Sout	thern Union Gas Company
lecompletion	OII Dry Gas	•	
hange in Ownership	Casinghead Gas Condensa	ate Effective 8/1	[70
change of ownership give name			
change of ownership give name nd address of previous owner			
	EASE		
ESCRIPTION OF WELL AND L	Well No. Pool Name, Including Form		Lease No.
OMLER A	1 BASIN DA	AKOTA State, Federal	
ocation	1 0 1	11.50	. north
Unit Letter 7: 1650	Feet From The Cast Line	and 1650 Feet From Tr	<i>1</i> ·
2/2	28 -	10 , NMPM, 521,	n Juan County
Line of Section C Town	nship A Range	,	
FSIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS		ed compatable from
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approve	ea copy of this form is to be sent)
		Address (Give address to which approve	ed copy of this form is to be sent)
Name of Authorized Transporter of Casi			
Southern Union Gather	121.8	Fidelity Union Tower Bld Is gas actually connected? When	n rexas
If well produces oil or liquids, give location of tanks.	Unit		
f this production is commingled with	h that from any other lease or pool, g	rive commingling order number:	
COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'
Designate Type of Completion	On wen		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
,	•		Tuhing Death
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
			Depth Casing Shoe
Perforations			
	TUBING, CASING, AND	CEMENTING RECORD	
MALESTE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
HOLE SIZE			
			+
	<u></u>	<u></u>	and must be sound to or exceed ton all.
TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be af	fter recovery of total volume of load oil opth or be for full 24 hours)	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ife, etc.)
ware the out that to their			Chara Stra
Length of Test	Tubing Pressure	Casing Pressure	Choke Size ALICE 9.1 1970
		Water - Bbls.	GGS-MCF
Actual Prod. During Test	Oil-Bbls.	מינים - החופו	OH CON. COM.
	<u> </u>	<u></u>	DIST. 3
A40 8972 T			
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
THE PROPERTY OF			Challe Size
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
			ATION 0010 100101
CERTIFICATE OF COMPLIAN	ice		ATION COMMISSION
		APPROVED AUG 31 1970	, 19
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.		Il a : ~ in al Signed Di	y Emery C. Arnold
		11.	
	\wedge	TITLE SUPERVISOR DIST	` <u>.</u> #3
	1 /		

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

G. A. Ford

Sr. Production Clerk

8/28/70

(Date)

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