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LAND OFFICE					
IRANSPORTER	OIL	<u> </u>			
	GAS	1			
OPERATOR		7			
PRORATION OFFICE		<u> </u>	<u> </u>		
Operator Tenneco Oil Compa					
Address					

	DISTRIBUTION SANTA FE FILE U.S.G.S.	REQUEST F	ONSERVATION COMMISSION FOR ALLOWABLE AND NSPORT OIL AND NATURAL (Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65			
1.	LAND OFFICE I RANSPORTER OIL GAS / OPERATOR / PRORATION OFFICE	AUTHORIZATION TO TRAI	NSFORT GIL AND NATURAL C	3/43			
	Tenneco Oil Compa	iny					
	Address Suite 1200 Lincol	uite 1200 Lincoln Tower Building, Denver, Colorado 80203					
	Reason(s) for filing (Check proper box) New We!1 Recompletion	Change in Transporter of: Oil Dry Gas	Other (Please explain) Effective 9-1	; I – 70			
	Change in Ownership	Casinghead Gas Condens	sate X				
	If change of ownership give name and address of previous owner						
II.	DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including Fo	ľ				
	Prichard Location	3 Basin Dakota	State, reaerd	ucrFee Federal			
	24	Feet From The North Line					
	Line of Section 31 Tov	waship 29N Range	8W , NMPM, Sa Jua	In County			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be							
	Plateau, Inc.	singhead Gas or Dry Gas	P. O. Box 108, Farmi Address (Give address to which appro	ngton, N. M. 87401 wed copy of this form is to be sent)			
	Nume of Admontage frameporar		Is ags actually connected? Wh				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Age.	Is gas actually connected? Wh	en			
If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA							
34.	Designate Type of Completic		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Perforations Depth Casing Shoe						
			CEMENTING RECORD	SACKS CEMENT			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
V. TEST DATA AND REQUEST FOR ALLOWABLE OII. WELL (Test must be after recovery of total volume of lowable for this depth or be for full 24 hours)							
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	/ NLULITED \			
	Length of Test	Tubing Pressure	Casing Pressure	Cho SizSEP 3 1970			
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas MOIL CON. COM.			
				DIST. 3			
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
VI.	CERTIFICATE OF COMPLIAN	CE		ATION COMMISSION			
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.			APPROVED SEP 3 1970 A. R. Kendrick 19 Original Signed by A. R. Kendrick 19 PETROLEUM ENGINEER DIST, NO. 3 PETROLEUM ENGINEER DIST, NO. 3				
	g_{AA}		TITLE 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.				
	Sr. Production CYET	pture)					
	8-27-70 (Title)		able on new and recompleted w	All sections of this form must be filled out completely for allow able on new and recompleted wells. Fill out only Sections 1, II, III, and VI for changes of owner of conditions.			
	(D	ate)	well name or number, or transpo	rter, or other such change of condition			