	DISTRIBUTIO	4				
	ANTA FE					
	FILE					
	J.S.G.S.		H			
	LAND OFFICE				•	
	TRANSPORTER	OIL	+			
	OPERATOR		2			
1.	PRORATION OF	ICE				
	Tenneco Oil Compan Address 720 So. Colorado B Reason(s) for filing (Check proper box)					
Reason(s) for filing (Check proper box)						
	New Well				С	
	Recompletion				0	
	Change in Ownership	·L			С	
	ne					
1.	DESCRIPTION OF WELL AND LEA					
	Pritchard				Ŀ	
	Location					
	Unit Letter F		;	1000	F	
	Line of Section	31		Townsh	ip	
I.	DESIGNATION OF TRANSPORTER O					
	Plateau, Inc.					

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

FILE	REQUEST	T FOR ALLOWABLE	Supersedes Old C-104 and C-1 Effective 1-1-65		
J.S.G.S.	AUTHORIZATION TO TE	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE		CANSI OKT OIL AND NATORAL	. GAS		
TRANSPORTER OIL	 				
OPERATOR Z			484 90 oka opol -		
PRORATION OFFICE			API 30-045-22345		
Operator	<u> </u>				
Tenneco Qil C	Company				
Address					
Reason(s) for filing (Check proper	rado Blvd., Denver, Colora box)	0ther (Please explain)			
New Well	Change in Transporter of:				
Recompletion X	Oil Dry C	Gas 🔲			
Change in Ownership	Casinghead Gas Cond	ensate			
If change of ownership give nam	ie				
and address of previous owner _					
DESCRIPTION OF WELL AS			*SF-078487-A		
Pritchard	Well No. Pool Name, Including 3-A Blanco Pictur		Leds 4 .40.		
Location	3-A Branco Fietur	eu Cilits State, reac	eral or Fee Federal *		
Unit Letter P;	1000 Feet From The South L	ine and 800 Feet From	m The East		
			in the		
Line of Section 3]	Township 29-N Range	8-W , NMPM, San	Juan County		
DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL G	446			
Name of Authorized Transporter of			roved copy of this form is to be sent)		
Plateau, Inc.		Box 108, Farmington,	New Mexico 87401 roved copy of this form is to be sent)		
Name of Authorized Transporter of		1			
El Paso Natural Gas	Unit Sec. Twp. Age.	Box 990, Farmington, Is gas actually connected?	New Mexico 87401		
If well produces oil or liquids, give location of tanks,	P 31 29N 8W	No No	ASAP		
If this production is commingled	with that from any other lease or pool		710711		
COMPLETION DATA					
Designate Type of Compl	etion — (X)	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
5/19/77	6/5/79	4821'	4770'		
Elevations (DF, RKB, RT, GR, etc.	•	Top Oil/Gas Pay	Tubing Depth		
5853' GL	Pictured Cliffs	2294 '	2335'		
Perforations 80 holes fro	m 2294' to 2326'		Depth Casing Shoe		
00 1101 (23 110		ND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
12 1/4"	9 5/8"	224 '	225		
8 3/4"	4 1/2" w/liner	2618'	250		
6 1/8"	1 1/4"	4820' 2335'			
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be		il and must be equal to or exceed top allow		
OIL WELL	able for this a	depth or be for full 24 hours)			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flew, pump, gas	lift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Oil-Bbis.	Water-Bbis.	Gas-MCF		
		JUL 23 1979			
GAS WELL		I SAM COM	<i>[</i>		
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMOF	Gravity of Condensate		
2385	3 hrs. Tubing Pressure (Shut-in)				
Testing Method (pitot, back pr.)		Casing Pressure (Shut-in)	Choke Size		
back pressure	367	698	3/4"		
CERTIFICATE OF COMPLIA	ANCE	OIL CONSERV	21979 OMMISSION		
hereby certify that the rules a	nd regulations of the Oil Conservation	APPROVED			
Commission have been complie	d with and that the information given the best of my knowledge and belief.	Original Signed by A. R. Kendrick			
ibove is true and complete to	the best of my knowledge and belief.		OR DISTRICT # &		
<i>/</i> ·,	/	TITLE			
11.1.0	11/		compliance with RULE 1104.		
Carly	anature)	well, this form must be accome	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		
/ '	ative Supervisor	tests taken on the well in acc	ordance with RULE 111.		
		All sections of this form made able on new and recompleted wards	nust be filled out completely for allow wells.		
7/20/	7 9	Fill out only Sections I.	II. III. and VI for changes of owner		
	(Date)	well name or number, or transporter, or other such change of condition			

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.

Sensett Forms C-104 must be filed for each pool in multiply