and the second s			/
NO. OF COPIES RECEIVED U			1
SANTA FE		DNSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-116
FILE /	REQUEST	AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	AS
LAND OFFICE			
TRANSPORTER GAS /			
OPERATOR /			
PROPATION OFFICE Operator			
Tenneco Oil Comp	2277		
Address	Durango, Colorado 81301		
Reason(s) for filing (Check proper l		Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry Gas	Effective first	delivery
Change in Ownership	Casinghead Gas Conden	sate	
If change of ownership give name and address of previous owner			
I. DESCRIPTION OF WELL AN	D LEASE Well No. Hog Linge, including Fo	ormation Kind of Lease	Lease No.
Lease Name Florance	73 Blanco Pictur		
Location .			
Unit Letter;;		e and 840 Feet From T	
Line of Section 25	Township 29N Rang@W	, NMPM,	San Juan County
I. <u>DESIGNATION OF TRANSPO</u>	ORTER OF OIL AND NATURAL GA	S Address (Give address to which approx	and conv of this form is to be sent)
Name of Authorized Transporter of	Oil or Condensate	Address (Give daaress to which approx	year copy of this form is to be some
Name of Authorized Transporter of	Casinghead Gas or Dry Gas X	Address Give address to which approv	ped copy of this form is to be sent)
		P. O. Box 990, Farming	
El Paso Natural	Unit Sec. Twp. Pge.	Is gas actually connected? Whe	
If well produces oil or liquids, give location of tanks.	D 25 29 9	No	On Approval
	with that from any other lease or pool,		
If this production is commingled V. COMPLETION DATA			
Designate Type of Comple	etion (Y)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v
	Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.
Date Spudded			2561
4/13/66 Elevations (DF, RKB, RT, GR, etc.)	5/9/66 Name of Producing Formation	2653 Top Oil/Gas Pay	Tubing Depth
6041 Gr.	Blanco Pictured Cliffs	2512	None
Perforations			Depth Casing Shoe
2512-2522			2651
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	126	100
7-7/8"	3-1/2"	2651	1
	TOP ATTOURNET OF OR ALL TO	feet recovery of total volume of load oil	and must be equal to an exceed top allow
V. TEST DATA AND REQUEST OIL WELL	I FOR ALLOWABLE (lest must be a able for this de	epth or be for full 24 hours)	CLIII A
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)
			Choke Sile O 1CF
Length of Test	Tubing Pressure	Casing Pressure	Choke Sile. DEC 18 1961
	O) Phi-	Water-Bbls.	Gas-MCF
Actual Prod. During Test	Oil-Bbls.		OIL COTO
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
1799	3 hrs		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pr.		920	3/4"
VI. CERTIFICATE OF COMPLIANCE			ATION COMMISSION
		DEC	2 6 1967
I hereby certify that the rules	and regulations of the Oil Conservation	APPROVED Signed by	Emery C. Arnold
Commission have been compli- above is true and complete to	ed with and that the information given the best of my knowledge and belief.		
•		SUPERV	VISOR DIST II.
		4 111 6 4	

(Title)

(Date)

December 15, 1967

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 then on the well in accordance with MULE 111.

All acctions 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 completed wells.