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DISTRIBUTION			
SANTA FE		1	
FILE		1	V
U.\$.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	1	
OPERATOR		1	
BROBATION OF	EICE		

Sr. Production Clerk

November 14, 1969

(Title)

(Date)

	PISTRIBUTION		NSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110		
	SANTA FE /		OR ALLOWABLE	Effective 1-1-65		
	FILE / V		AND	A C		
	U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL G	43		
	LAND OFFICE					
	TRANSPORTER OIL / GAS /					
	OPERATOR /	1				
1.	PRORATION OFFICE					
	Tenneco Oil Company	<i>y</i>				
İ	Address					
į	P. O. Box 1714, Du	rango, Colorado	Other (Please explain)			
ſ	Reason(s) for filing (Check proper box) Change in Transporter of:		orter of condensate		
	New Well Recompletion	Oil Dry Gas	F 1	_		
	Change in Ownership	Casinghead Gas Condens	sate 🌌			
١						
	If change of ownership give name and address of previous owner					
	and address of breatons owner			-		
II.	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including Fo	ormation Kind of Lease	Lease No.		
	Lease Name	Well No. Pool Name, Including ro	71111411011	lam 00001/t		
	Hamner	7 12000 110001				
	Location Unit Letter M; 9	90 Feet From The South Line	e and 925 Feet From	The West		
	_	OOM - OF	у , мырм, San Ju	an County		
	Line of Section 28 To	wnship 29N Range 9W	, NMPM, San Ju			
		THE OF OH AND NATIOAL CA	S			
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	Address (Otto Decision in			
	The Permian Corp	<u></u>	200 B Petroleum Plaza	, Farmington, N. M.		
	The Permian Corp	asinghead Gas or Dry Gas X	Address (Give address to which appro	ved copy of this form is to be sent)		
	El Paso Natural Gas	Company	P. O. Box 990, Farmin			
		Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en		
	If well produces oil or liquids, give location of tanks.	M 28 29 9				
	If this production is commingled w	rith that from any other lease or pool,	give commingling order number:			
If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Out Well New Well Workover Deepen Plug Back Same Resty						
	Designate Type of Complet	ion - (X) Oil Well Gas Well	New Well Workover Deepen			
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Date Spudded 5/5/66	6/14/66	2403	2343		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	5876 Gr.	Aztec Pictured Cliffs	2280			
	Perforations			Depth Casing Shoe		
	2280-2334					
			D CEMENTING RECORD	SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	100		
	12-1/4"	8-5/8"	125	250		
	7-7/8"	3-1/2"	2399			
		TOP ATTOWARTE OF THE PROPERTY	after recovery of total volume of load of	l and must be equal to or exceed top allow		
٧	TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be able for this d	lepth or be for full 24 hours)			
	OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)					
	Date Liter Hen On view of a			- A-IVIA		
	Length of Test	Tubing Pressure	Cdsing Pressure	Chok. PEL ULITED		
			Water Bhia	Gta-MQP11 1 7 1050		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	9MOV 1 7 1969		
				OIL CON. COM.		
				DIST. 3		
	GAS WELL	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual Prod. Test-MCF/D 1822	2 hrs				
	Testing Method (pitot, back pr.)		Casing Pressure (Shut-in)	Choke Size		
	Back Pr.	·	697	3/4"		
VI CERTIFICATE OF COMPLIANCE			OIL CONSER	ATION COMMISSION		
			· []	101 7 1969		
	I hanabu aansifu shas sha mulaa a	nd regulations of the Oil Conservation	'•• 1[·	APPROVED, 19		
				by Emery C. Arnold		
	above is true and complete to	the best of my knowledge and belief	,	SUPERVISOR DIST. #5		
			TITLE			
	0/1	1 /	This form is to be filed i	n compliance with RULE 1104.		
		In	If this is a request for al	lowable for a newly drilled or deepend possing by a tabulation of the deviation		
		Signature) G. A. Ford	well, this form must be accome tests taken on the well in ac			

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