	DISTRIBUTION ANTA FE FILE J.S.G.S. LAND OFFICE		CONSERVATION COM FOR ALLOWABLE AND ANSPORT OIL AND	Effective 1-1-65	Form C-104 Supersedes Old C-104 and C-1; Effective 1-1-65			
1.	TRANSPORTER OIL GAS OPERATOR PRORATION OFFICE Operator							
	Tenneco Oil Company							
	720 S. Colo. Blvd., Denver, CO 80222 Reason(s) for filing (Check proper box) [Other (Please explain)							
	ew We!i							
4	If change of ownership give name and address of previous owner							
II.	DESCRIPTION OF WELL AND	LEASE. Well No. Pool Name, Including F	ormation Mesa	Kind of Lease		Legse No.		
	Hamner	2A Basin Dakota/		State, Federa	l or Fee	2,000.		
	Unit Letter C : 82	5 Feet From The North Lir	ne and 1660	Feet From	rhe West	_		
	Line of Section 28 To	wnship 29N Range	9W , NMPI	4. San Ji	uan	County		
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	ıs					
	Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) Giant Refining Box 256, Farmington, N.M. 87401 Name of Authorized Transporter of Casinghead Gas or Dry Gay YV Address (Give address to which approved copy of this form is to be sent)					•		
	Southern Union Gatheri	Box 750, Farmington, N.M. 87401						
	If well produces oil or liquids,	Is gas actually connected? When						
	If this production is commingled with that from any other lease or pool, give commingling order number:							
	COMPLETION DATA	Plug Back Same Res						
	Designate Type of Completic	on - (X) Gas Well X	New Well Workover X Total Depth	Deepen	P.B.T.D.	v. Diff. Resfv.		
	3/29/80	5/23/80	6710		6708			
	Elevations (DF, RKB, RT, GR, etc.) 5721	Name of Producing Formation Mesa Verde	Top Oil/Gas Pay 3870		Tubing Depth 4211			
	Perforations 3870-4433		1 3070		Depth Casing Shoe			
		TUBING, CASING, AND	T					
	HOLE SIZE CASING & TUBING SIZE 13 3/4 9 5/8		DEPTH SET		SACKS CEMENT			
	8 3/4	7	4800		425			
	6 1/4	4 1/2(liner)	6714		320			
v.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top all							
	OIL WELL	able for this de	epth or be for full 24 hour	e) `	<u> </u>			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo	w, pump, gas iij	it, etc.j			
	Length of Test	Tubing Pressure	Casing Pressure		Choke Size			
	Actual Prod. During Test	Oil - Bbls.	Water - Shis,		Gas-MCF			
	GAS WELL		1 2 30	70 /				
	Actual Prod. Test-MCF/D Length of Test		Bbis. Contensate/MMCF		Gravity of Condensate			
	AOF=5410 Testing Method (pitot, back pr.)	3 hrs Tubing Pressure(Shut-in)	Casing Pressure (Shar		Chaka Sta			
	back pressure	725	725	j	Choke Size			
VI.	CERTIFICATE OF COMPLIANO			CONSERVA	TISH COMMISSION			
	I hereby certify that the rules and r Commission have been compiled w	Original Signed by FRANK T. CHAVEZ						
Commission have been complied with and that the information given shows in this and complete to the best of my knowledge and belief.			Dy Unginal Signed by FRANK 1. CHAPLE.					

VI

	to the best of my knowledge and be	
a. lu	Water-	31 (
	(Signature)	
Asst. Div. Admin.	. Manager	
	(Title)	
- 10 mm 10	1000	

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

SUPERVISOR DISTRICT # 3

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 allow-able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, all name or number, or transporter, or other such change of condition. nesses Frome C-10d must be filed for each anal in multialw