NO. OF COPIES RECEIVED		Ц		
DISTRIBUTION				
SANTA FE				
FILE		Ĺ		
U.S.G.S.		Ĺ		
LAND OFFICE				
IRANSPORTER	OIL			
	GAS	1		
OPERATOR		1		
PRORATION OFFICE				
Operator				

<u> </u>	DISTRIBUTION SANTA FE FILE	REQUEST FO	NSERVATION COMMISSION OR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
	U.S.G.S. LAND OFFICE IRANSPORTER OIL	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL	L GAS	
1.	OPERATOR / PRORATION OFFICE				
	Operator Tenneco Oil Compar Address	ıy			
	P. O. Box 1714. Di Reason(s) for filing (Check proper box)		Other (Please explain)		
	New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Gas Casinghead Gas Condense	ate		
	If change of ownership give name and address of previous owner	·			
W.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including For	mation Kind of L	ease Lease No.	
	Florance "B"	1 Blanco Picture	S	deral or Fee Fed 080003	
	Location	Teet From The North Line		om The West	
		mship 30N Range	9W , NMPM,	San Juan County	
ın.	DESIGNATION OF TRANSPORT	or Condensate	Address (Give address to which a	pproved copy of this form is to be sent)	
	Name of Authorized Transporter of Cas El Paso Natural G	==	Address (Give address to which a P. O. Box 990, Farmi	pproved copy of this form is to be sent)	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
IV.	f this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Restv. Diff. Restv				
	Designate Type of Completic	i I XI	x	P.B.T.D.	
	Date Spudded	Date Compl. Ready to Prod. 9/29/65	Total Depth 2805	2749	
	8/21/65 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	5946 Gr. Perforations	Blanco Pictured Clif	fs 2685	Depth Casing Shoe	
	2690-85 TUBING CASING AND		CEMENTING RECORD	2730	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	12-1/4"	8-5/8"	110	50	
	7-7/8"	3-1/2"	2796	981	
v	. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be af able for this de	ter recovery of total volume of loa pth or be for full 24 hours)	d oil and must be equal to or exceed top allow	
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, a	as lift, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure Water-Bbls.	121 150 TO	
	Actual Prod. During Test	Oil-Bble.	W4.51 - 23.51	MAC 1 2 1968	
	GAS WELL			Officering of Controlled	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	DIST. 3	
	Testing Method (pitot, back pr.)	3 hrs Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Back Pr.	Tubing Freshard (Share-121)	675	3/4"	
Vì	CERTIFICATE OF COMPLIANCE		OIL CONSE	MAR 12 1908	
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.		By Original Signed PETROLEUM E	by A. R. Kendrick-		
	, ,		TITLE to be file	d in compliance with RULE 1104.	
	M. K. Thucon	ls 1	If this is a request for	allowable for a newly drilled or deepend	
	M. K. Wagner /(Siz	nature)	If this is a request for showards to a tabulation of the deviatio well, this form must be accompanied by a tabulation of the deviatio tests taken on the well in accordance with RULE 111.		

(Title)

(Date)

3/11/68

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 completed wells.