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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator		Tenneco Oil Company	
Address		Suite 1200 Lincoln Tower Bldg., -Denver Colorado 80203	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE		NM 13686	
Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
Pritchard	5	Basin Dakota	State, Federal or Fee Fed
Lease No.			
Location			
Unit Letter	B	1190 Feet From The	North Line and 1650 Feet From The East
Line of Section	34	Township	31-N
		Range	9-W
		NMPM,	San Juan
			County

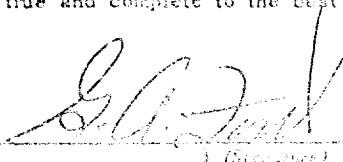
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil	<input type="checkbox"/>	or Condensate	<input checked="" type="checkbox"/>
Plateau Inc.	Address (Give address to which approved copy of this form is to be sent)		
	P.O. Box 108-Farmington, New Mexico 87401		
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/>	or Dry Gas	<input checked="" type="checkbox"/>
El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent)		
	P.O. box 990-Farmington, New Mexico 87401		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
	B	34	31
			Rge.
			9
Is gas actually connected?	When		
No			


If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well
		X	X
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
3-26-71	7-13-71	7388	7368'
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
6007 GR	Basin Dakota	7203	7359
Perforations	Depth Casing Shoe		
7327-7357 and 7203'-7237'	7372'		
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15"	10-3/4"	191'	185 sks
9-7/8"	7-5/8"	2980'	500 cu. ft.
6-3/4"	4-1/2"	7372'	325 sacks

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL		(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1400	3hrs.	NONE	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
3hrs. back pr.	1864	1867	3/4"

CERTIFICATE OF COMPLIANCE	
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.	
	
Sr. Production Clerk	
June 22, 1972	

OIL CONSERVATION COMMISSION	
APPROVED  19 72	
Original Signed by A. R. Kendrick	
BY	
TITLE Sr. Production Clerk	
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 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.	
This form must be filed for each pool in which the well is producing.	