DISTRIBUTION	DN	
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
IRANSPORTER	OIL	
INAMERONIEN	GAS	

/	/ JONIA DECUISE FOR ILL SUITE FOR					Form C-104 Supersedes Old C-104 and C-1	
	FILE	7240201	AND		Effective 1-1-6		
	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND I	NATURAL G	AS		
	LAND OFFICE	4			•		
	TRANSPORTER GAS	4					
	OPERATOR	i - ^ ` · · `					
1.	PRORATION OFFICE	1					
•••	Operator						
	Tenneco Oil Company						
	Address						
	P. O. Box 3249, Englewing Reason(s) for filing (Check proper box		101				
	New Well	Change in Transporter of:	Other (Please	explain)			
	Recompletion	Oil Dry Go	ıs 🗍				
	Change in Ownership	Casinghead Gas Conde	nsate 🔲				
	Makana of amenakia sina sama						
	If change of ownership give name and address of previous owner						
11.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including F	ormation	Kind of Lease	USA	Lease No.	
	Heaton A	1E Basin Dakota		State, Federal	-	078097	
	Location					1 0.005.	
	Unit Letter C ; 790	DFeet From ThenorthLin	ne and 1520	Feet From T	he <u>West</u>		
				_			
	Line of Section 30 Tox	waship 31N Range	11W , NMPM,	San J	uan	County	
	DECLARACION OF TRANSPORT						
111.	Name of Authorized Transporter of Oil	or Condensate	Address (Give address t	o which approve	ed copy of this form is t	o be sent)	
	Giant Refinery		7227 N. 16th,				
	Name of Authorized Transporter of Cas	singh a d Gas or Dry Gas 💢	Address (Give address t			o be sent)	
	El Paso Hatural Gas		P. O. Box 990,	Farmingto	on, NM 87401		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connecte	d? When			
	give location of tanks.	C : 30 : 31N : 11W	<u>l</u> No	- -	ASAP		
		th that from any other lease or pool,	give commingling order	number:			
17.	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same Res	'v. Diff. Res'v.	
	Designate Type of Completion	on - (X)	X :	1		:	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.		
	7/18/84	9/3/84	7060'KB		7009'KB		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth		
	5931 GR	Dakota	6854' KE	3	6910 KB		
		854-57, 6864-70, 6930-55	' KB		7009 ' KB		
		TUBING, CASING, AND		D	7000 110	· · · · · · · · · · · · · · · · · · ·	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE		SACKS CEN	IENT	
	12-1/4"	9-5/8" csg	306 ' KB		200sx, 236CF		
	8-3/4" 6-1/4"	7" csq 4-1/2" csg liner	4650 KB	-	535sx, 866CF		
	0-1/4	2-3/8" tbq	4503-7057'KB 6910'KB		350sx, 545CF		
v	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a		ne of load all a	nd must be squal to or s	exceed top allow	
٠.	OIL WELL	able for this de	pth or be for full 24 hours)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow				
			Casing Pressure		5 101	 -	
	Length of Test	Tubing Pressure	Coaling Private Co	53 B U	רינטוייי. יינטוייי		
	Actual Prod. During Test	Oil-Bbls.	Water-Bbis: Va	4 7100A	Gas - MCF		
	, , , , , , , , , , , , , , , , , , , ,			1 71984			
		<u> </u>	011 (ON. D	٧.		
	GAS WELL	OIL CON. DIV.					
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	ادار	Gravity of Condensate		
	4055 Testing Method (pitot, back pr.)	3 hrs. Tubing Pressure(Shut-in)	Casing Pressure (Shut-	101	Choke Size		
	· ·	1910	1920	<u>,</u>	3/4"		
3/1	Back pressure	<u> </u>	1	ONSERVA	TION COMMISSION		
¥1.	CERTIFICATE OF COMPLIANCE		9-31-84	ŠFP	21 1984	•	
	I hereby certify that the rules and t	egulations of the Oil Conservation	APPROVED	<u> </u>	~± 1304	19	
	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. (Signature)		Original Signed by FRANK T. CHAVEZ SUPERVISOR DISTRICT # 3				
			TITLE	201	Pift look and		
			This form is to	be filed in co	ompliance 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.				
	Sr. Regulatory Analy		All sections of	this form mus	t be filled out comple	tely for allow-	
	9/6/84	,	able on new and rec		III. and VI for cher	ges of owner.	

(Date)

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