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L	NO. OF COPIES RECEIVED					
	DISTRIBUTION	NEW	MEXICO OIL CO	NSERVATION COMMISSION	Form C-104	
L	SANTA FE		REQUEST F	OR ALLOWABLE	Supersedes Old C-	-104 and C-1
L	FILE			AND	Effective 1-1-65	
Į	U.S.G.S.	AUTHORIZA	TION TO TRAI	ISPORT OIL AND NATURA	L GAS	
	LAND OFFICE					, e
	TRANSPORTER OIL					
L	GAS				1 1 W 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	OPERATOR			#E	MARZ 6 1383 DIV	\$
. [PRORATION OFFICE				WAR V	
	Tenneco Oil Company			Ţ.	a Colora	
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	P. O. Box 3249, Engley	wood, Co. 5019	55		Our Dia	
ŀ	Reason(s) for filing (Check proper box)			Other (Please explain)		
1	New We!1	Change in Trans	porter of:			
1	Recompletion	Oil	Dry Gas		•	
	Change in Ownership	Casinghead Gas	Condens	 		
	Change in Ownership	Casingneda Gos				
	If change of ownership give name					
	and address of previous owner					
		FACE				
٠,	DESCRIPTION OF WELL AND I	Well No. Pool N	Name, Including Fo	rmation Kind of L	ease USA	Lease No.
	Pritchard	i I	sin Dakota	•	deral or Fee NM	013686
I		OL Da	3111 Dakoca			
	Location D 100	651	North	900'	West	
ļ	Unit Letter D : 106	65 Feet From The	NOI CII Line	and YUU Feet Fi	rom The	
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	2.4			014		County
	2.4	mship 31N	Range	9W , NMPM,	San Juan	County
	Line of Section 34 Tow		Range	9W , NMPM,		County
	Line of Section 34 Tow	ER OF OIL AND	Range NATURAL GA	9W , NMPM,	San Juan	
•	Line of Section 34 Town DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	ER OF OIL AND or Condens	Range NATURAL GA	9W , NMPM, S Address (Give address to which a	San Juan	
•	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Conoco, Inc. Surface	TER OF OIL AND br Condens Transporter	Range NATURAL GA	9W , NMPM, S Address (Give address to which a P. O. BOX 460, Hobb	San Juan pproved copy of this form is to book. N. M. 88240	be sent)
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OIL WELL

ate 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-Bble.	Water - Bbis.	Gcs - MCF	

GAS WELL								
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate					
506	3 hrs							
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size					
back pressure	1372	1372	3/4"					
CERTIFICATE OF COMPLIA	NCE	OIL CONSERVATION COMMISSION						

4/-/5-85 APPROVED

BY.

TITLE .

VI. 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.

> Km (Signature)

(Date)

Sr. Regulatory Analyst

(Title)

3/12/85

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.

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

All sections of this form must be filled out completely for allowable on new and recompleted wells.

4PR | 5 1965

SUPERVISOR DISTRICT # \$

Original Signed by FRANK T. CHAVEZ

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