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SANTA FE	/							
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LAND DEFICE	i							
TRANSPORTER OIL	1							
GAS	1							
OPERATOR	2							
PRORATION OFFICE								
TENNECO OIL COMP Address Suite 1200 Linco Reason(s) for bring (Check proper box.								
						Reason(s) for triling (Cheek		
						New Well		
						1 1771		

-	SANTA FE /		CHSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110		
	FILE /		AND	Effective 1-1-65		
	U.S.G.J.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL G	AS		
	LAND DEFICE					
Ì	TRANSPORTER GAS /					
ŀ	OPERATOR 2					
	PROPATION OFFICE					
1.	Operator					
	TENNECO OIL COMPA	ANX				
	Address	In Tower Bldg., Denver,	. Colorado 80203			
	Reason(s) for bring (Check proper box)		Other (Pizase explain)			
	New Well	Change in Transporter of:				
	Recompletion	Oil Dry Go	is [
	Change in Gwoers's	Casinghead Gas Conde	asate			
	If change of ownership give name					
	and address of previous owner					
	STOCKSTON OF WELL AND I	ಕಾ 40ರ		I-149-IND-7971		
11.	II. DESCRIPTION OF WELL AND LEASE. Lease Name Well No. Pool Name, Including Formation Kind of Lease Indian Indian					
Gallegos 1 Basin Dakota State, Federal or Fee Indian						
	Location	- North	1850 Foot From 5	East		
	Unit Letter_G; 178	5 Feet From The North Lin	ne andFeet From T	he		
	Line of Section 29 Tow	mship 26N Range	11W , NMPM,	San Juan County		
	Line of Section 29 Tow					
Ш.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS Address (Give address to which appro-	and again of this form is to be sent)		
	Name of Authorized Transporter of OII	or Condensate XX		ton, New Mexico 87401		
	Thriftway Name of Authorized Transporter of Cas	Inghead Gas or Dry Gas	Address (Give address to which appro-	ved copy of this form is to be sent)		
	El Paso Natural G		1	Box 990 Farmington, New Mexico 87401		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Wh			
	give location of tanks.	G 10 25 11		,		
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
	Designate Type of Completion	$\mathbf{x} = \mathbf{x}$	X			
	Date Spudged	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	2/18/73	Name of Producing Formation	6050' Top Oll/Oas Pay	6015* Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.) 6097.0 GR	Name of Producing Connactors		5731'		
	Perforations			Depth Casing Shoe		
			D CEMENTING RECORD	SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE 8-5/8"	626'	375 sks circulated		
	12-1/4" 7-7/8"	4-1/2"	6050	2 stages: Ist stage:		
	7-7/8		185 sks 5	0-50-poz 50sk cl c/4% gel		
)	250 sk 40/60w/4% gel		
V.	EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)					
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l			
	Date First New Ott Nam 10 1 and					
	Length of Test	Tubing Pressure	Casing Pressur	Choke Size		
			Water-Bb	V Gas-MCF		
	Actual Prod. During Test	Oil - Bbls.	4073			
			SEP 21 1973			
	GAS WELL		SEP COM			
	Actual Prod. Test-MCF/D	Length of Tast	SEP COM. Bbis. Contensate/MMCOM. 3 OIL DIST. Casing Pressure Cont-12	Gravity of Condensate		
	1224	24	Casing Pressure (Thut-in)	Cho'se Size		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	251	3/4		
	CE COUNTY AND	89 psi		ATION COMMISSION		
VI.	CERTIFICATE OF COMPLIAN	LE	SEP 24 1	973		
	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.		APPROVED	A P Wendrick		
			By Original Signed 53	A. A. Bentz Iva		
			Philipotre and the	man dist. No. 3		
				TITLE		
		1100	as a land a service to all	compliance with RULE 1104.		
	- Chamber	With the second	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			
	Production Clerk	K				
	(T	itle)	able on new and recompleted	able on new and recompleted wells.		
	9/17/73		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			
		ate)	Separate Forms C-104 mu	at be filed for each pool in multipl		
			il annual matte	•		

