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			ONSERVATION COMMISSION	Form C-104		
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	Tenneco Oil Comp	/	Kroming			
	1200 Lincoln Tower Building, Denver, Colorado 80203					
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	Reason(s) for filing (Check proper box)		Other (Please explain)	Day COM		
	New Well X	Change in Transporter of:		CIT COM. COM.		
	Recompletion	Oil Dry Gas		Challe 3		
	Change in Ownership	Casinghead Gas Conden	sate 🔲			
	If change of ownership give name		•	•		
	and address of previous owner					
П.	DESCRIPTION OF WELL AND		I Wash of Land	· · · · · · · · · · · · · · · · · · ·		
	Lease Name	Well No. Pool Name, Including Fo		1 50000		
	State Com C	5 Planco Picture	Cliffs State, Federal	or Fee State B-10405-36		
	Location	•	•			
	Unit Letter D : 790	Feet From The <u>NOrth</u> Line	and 790 Feet From T	he <u>West</u>		
	Line of Section 32 Tow	mship 29N Range	9W , NMPM, San J	uan County		
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Ш.	Name of Authorized Transporter of Oll	CER OF OIL AND NATURAL GA	Address (Give address to which approv	ed conv of this form is to be sent!		
		<u> </u>	nadios (orde day es to bine approx	is to be sent,		
	None Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Give address to which approv	ed conv of this form is to be sent)		
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	El Paso Natural (as Company Unit Sec. Twp. Rge.	P. O. Box 990, Farming			
	If well produces oil or liquids, give location of tanks.	i i i i i i				
			No			
If this production is commingled with that from any other lease or pool, give commingling order number:						
			gree committigiting office inclineer.	*		
	COMPLETION DATA	Oii Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.		
		Oii Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	COMPLETION DATA	Oii Well Gas Well		Plug Back Same Res'v. Diff. Res'v. P.B.T.D.		
	COMPLETION DATA Designate Type of Completion Date Spudded	n - (X) Oil Well Gas Well Note Compl. Ready to Prod.	New Well Workover Deepen Total Depth	P.B.T.D.		
	Designate Type of Completion Date Spudded 1/17/69	n - (X) Oil Well Gas Well	New Well Workover Deepen			
	Designate Type of Completion Date Spudded 1/17/69 Elevations (DF, RKB, RT, GR, etc.)	Date Compl. Ready to Prod. 3/19/69 Name of Producing Formation	New Well Workover Deepen Total Depth 22421 Top Oil/Gas Pay	P.B.T.D. 21.95 * Tubing Depth		
	Designate Type of Completion Date Spudded 1/17/69	Date Compl. Ready to Prod.	New Well Workover Deepen Total Depth	P.B.T.D.		
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VI.

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(Signature)						
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(Date)

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. Separate Forms C-104 must be filed for each pool in multiply

