1	NO. OF COPIES RECEIVED	. /					
	DISTRIBUTION SANTA FE		onservation commเรมเท FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110			
	FILE		AND	Effort E165VED			
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	AS			
	LAND OFFICE			2 4 1970			
	TRANSPORTER GAS						
I.	PRORATION OFFICE			;. C.			
	Penroc Cil Corporation						
	Address P. O. Drawer 831, Midland, Texas 79701						
	P. O. Drawer Reason(s) for filing (Check proper box)						
	New Well	Change in Transporter of:					
	Recompletion			nip effective 11-1-70			
	Change in Ownership Y	Casinghead Gas Conden					
	f change of ownership give name Tenneco Oil Company, P. O. Box 1031, Midland, Texas 79701 and address of previous owner						
Ħ.	DESCRIPTION OF WELL AND I	Vell Nc. Pool Name, Including Fo	rmation Kind of Lease	Federal Lease No.			
	Lease Name Chio-Jones		Eddy State, Federal				
	Location		<i>u</i>				
	Unit LetterG;19	80 Feet From The North Line	e and1980 Feet From T	The East			
Line of Section 24 Township 19 South Range 31 East , NMPM, Eddy							
***	DESIGNATION OF TRANSPORT	TER OF OUL AND NATURAL GA	S				
111.	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approv				
	The Permian Corpora		Box 3119, Midland Address (Give address to which approv	ed copy of this form is to be sent)			
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas					
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. G 24 19 31	Is gas actually connected? Whe	n			
	If this production is commingled with that from any other lease or pool, give commingling order number:						
	COMPLETION DATA OII Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res						
	Designate Type of Completio	n - (X)					
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Perforations Depth Casing Shoe						
		TUBING, CASING, AND	CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
			the second	and must be equal to or exceed top allow-			
v.	TEST DATA AND REQUEST FO	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)					
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lij	(t, etc.)			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
				Gas - MCF			
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gub-MCr			
	l						
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
			Casing Pressure (Shut-in)	Choke Size			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	·				
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION				
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED DEC 24 1970 19				
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY_ W, a, Gresset				
	PENROC CIL CORPORATION		TITLE OIL AND GAS INSPECTOR				
	T BIN 000	M. 1- 1	This form is to be filed in compliance with RULE 1104.				
	By Allingall		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				
	(Sign	aiwe) (/0 ary-Treasurer	Well, this form that you in accordance with RULE 111. All bections of this form must be filled out completely for allow- able 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 completed wells.				
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		er 21, 1970					
	(De	ate)					

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