NO. OF COPIES RECEIVED	4					
DISTRIBUTION	NEW MEXICO OIL C	Form C-104				
SANTA FE	REQUEST	REQUEST FOR ALLOWABLE				
FILE 1 6	1	AND	Effective 1-1-65			
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS			
LAND OFFICE		THE STATE AND MATORIAL	0A3			
TRANSPORTER OIL GAS (
OPERATOR /	1					
PROPATION OFFICE	-					
Operator	<u> </u>					
Tenneco Oil Compan	У					
Suite 1200 Timesin	Morrow Dida Dansson Ga	Jorado 80203				
Reason(s) for filing (Check proper box	Tower Bldg., Denver, Co	Other (Please explain)				
New Well	Change in Transporter of:					
Recompletion	Oil Dry Ga	s X Effective Janu	ary 1 107h			
Change in Ownership	Casinghead Gas Conder		ary 1, 1914			
If change of ownership give name	Cosmigned Gas Contact	isale				
and address of previous owner						
DESCRIPTION OF WELL AND	LEASE. Well No.: Pool Name, Including Fo	ormation Kind of Leas	Jicarilla Cont. 109			
		State States	or Fee Indian			
Jicrailla "B"	5 Basin Dakot	,a	Indian			
Unit Letter K ; 169	5 Feet From The South Lin	e and 1545 Feet From	The West			
Line of Section 21 To	wnship 26N Range	5W , NMPM, Ric	Arriba County			
		_				
	TER OF OIL AND NATURAL GA	Address (Give address to which appro	and conv of this form is to be sent!			
Name of Authorized Transporter of Oil	or Condensate	Address (Give underess to which appro	ived copy of this form is to be sent,			
		ļ.,				
Name of Authorized Transporter of Ca	singhead Gas or Dry Gas X	Address (Give address to which appro	eved copy of this form is to be sent)			
Northwest Pipeline	Corporation		nington, New Mexico 87401			
If well produces oil or liquids,	Unit Sec. Twp. P.ge.		aen			
give location of tanks.	; к ; 21 ; 26 ; 5	1				
If this production is commissed wi	th that from any other lease or pool,	give commingling order number:	•			
COMPLETION DATA	th that from any other lease or poor,	give comminging order number.				
	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.			
Designate Type of Completic	on = (X)	1 1				
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
Date Spudded	Date Compi. Reday to Frod.	Total Deptii	1			
		T 01/0	Tuble - De-th			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth			
		<u> </u>				
Perforations			Depth Casing Shoe			
	TUBING, CASING, AND	CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
		1				
TEST DATA AND REQUEST F	UR ALLOWABLE (Test must be a)	fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allow-			
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,				
Date Liter New Oil May 10 I duke			LIVE			
		Coolea Processing				
Length of Test	Tubing Pressure	Casing Pressure	HITLET \			
Actual Prod. During Test	Oil-Bbls.	Water-Bble. DEC	1 GO MEF			
1						
·			N. COM.			
GAS WELL		OIL CO	N. COM.			
GAS WELL Actual Prod. Tost-MCF/D	Length of Test		,			
	Length of Test	OIL CO	T. 3			
	Length of Test Tubing Pressure (Shut-in)	OIL CO	II. 3			

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.

(Date)

Production Clerk

(Title)

12/13/73

OIL CONSERVATION COMMISSION FCD # 1074

	ROVED		Pt.	R .		19/	4	_, 1	9	
B.V	Original	Signed	Ъy	A.	R.	Ke	ndr 🗀	. . .		 _
TITL	_ PEURO	LECT BY	7.7	il die	- 	СЩ	32.0	3		 _

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, sell name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply