. HO OF COPIES RECEIVED		5	
DISTRIBUTION			
SANTA FE		/	
FILE		/	L
U.S.G.S.		İ	
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	1	
OPERATOR		1	
PRORATION OFFICE		<u> </u>	<u> </u>

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
JTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	

SANTA FE /	REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65	
FILE /	AUTHORIZATION TO TRAN	AND ISPORT OIL AND NATURAL (·· · · -	
U.S.G.S.	AUTHORIZATION TO TRAIN	NOFORT OIL AND NATORAL GAS		
OIL /				
TRANSPORTER GAS				
OPERATOR /		•		
PRORATION OFFICE	*			
• . Tenneco <u>Oil Co</u>	mpany			
Address		D		
Suite 1200 - L Reason(s) for filing (Check proper box)	incoln Tower Building -	Other (Please explain)	3	
New Well	Change in Transporter of:			
Recompletion	Oil Dry Gas			
Change in Ownership	Casinghead Gas Condens	sate		
If change of ownership give name				
and address of previous owner			•	
III. DESCRIPTION OF WELL AND I	EASE	rmation Kind of Leas	elegse No.	
Lease Name	Well No. Pool Name, mersaling to	State, Feder	glor Fee Fed NM-0468	
Gallegos Canyon Fed	. 1 Dakota			
Location Unit Letter K : 1460	Feet From The South Line	and 1450 Feet From	The West	
Unit Letter K : 1400	 -	Com	Juan County	
Line of Section 4 Tow	mship 25-N Range	11-W , NMPM, San	· Scarry	
II. DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S		
Name of Authorized Transporter of Oil	or Condensate X		07404	
Plateau, Inc.		Box 108, Farmington,	N.M. 8/401 oved copy of this form is to be sent).	
Name of Authorized Transporter of Cas		Box 990, Farmington,		
El Paso Natural Gas C	Unit Sec. Twp. P.ge.		hen	
If well produces oil or liquids, give location of tanks.	K 4 25 11	No		
If this production is commingled wit	th 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 Res'v. Diff. Res'v.	
Designate Type of Completion	on = (X)	Χ		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
6-11-72	7-25-72	6049	Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay 5886	5815	
6407 GR	Dakota		Depth Casing Shoe	
Perforations 5886' - 89' &	5898' - 5928' W/1 JSPF	e	6049	
		D CEMENTING RECORD	SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	70 Sk circulated	
12-1/4 7-7/8	5-1/2	6049	2 stages - 1st 259 sks	
7-146	3 1/2		2nd 151 sks. Stage collar @ 2014	
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a able for this d	enth or be for full 24 hours.	il and must be equal to or exceed top allow-	
OII, WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
Date First New Oil Num 10 1 dian		Flowing	Choke Staff	
Length of Test	Tubing Pressure	Casing Pressure	KLPLIATR	
	Oil-Bbls.	Water-Bbls.	Gas MCF	
Actual Prod. During Test	Off- Bris.		SEP 25 1972	
			OIL CON. COM.	
GAS WELL		Bbls. Condensate/MMCF	Gravity (Cond Sa. 3	
Actual Prod. Test-MCF/D	Length of Test 24 hrs.	None None		
4725 Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
Back Pressure	1967	1987	3/4	
VI. CERTIFICATE OF COMPLIAN	NCE		VATION COMMISSION	
		APPROVED SEP	2 5 1972	
I hereby certify that the rules and	regulations of the Oil Conservation with and that the information given	Ontainal Stoned b	y Emery C. Arnold	
Commission have been complied above is true and complete to the	Commission have been compiled with an arrangement of my knowledge and belief. BY			
		TITLE SUPERVISOR		
	′ /	This form is to be filed	in compliance with RULE 1104.	
111 L Shi	If this is a request for allowable for a newly drilled or deepend			
	mature)			
Sr. Production Clerk All sections of this form must be filled our complete				
(Title) 9/21/72 Fill out only Sections I. II. III, and VI for change well name or number, or transporter, or other such change.				
	Date)		must be filed for each pool in multiply	
		completed wells.		