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DISTRIBUTION		DNSERVATION COMMISSION	Form C-104 Supersedes Old C-1114 and C-110
SANTA FE	= REQUEST F	FOR ALLOWABLE	Effective 1-1-65
FILE		AND	ic .
U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL GA	
LAND OFFICE	-		
TRANSPORTER OIL			- 1 U \
GAS /	1		
OPERATOR	-		19/2/3
I. PRORATION OFFICE			Die Con
Operator			7037
Tenneco Oil Con	pany		
	- Durango Colorado		
Reason(s) for filing (Check proper box	- Durango, Colorado	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry Gas		ty to Transport
Change in Ownership	Casinghead Gas Conden	sate Effective First	Delivery
Things in Switching			
If change of ownership give name			
and address of previous owner			
II. DESCRIPTION OF WELL AND	LEASE		
Lease Name	Lease No. Well No. Pool Na	me, Including Formation	Kind of Lease
Schwerdtfeger	''A'' 5 B	asin Dakota	State, Federal or Fee Federal
Location			
Unit Latter O . 11	90 Feet From The South Lin	e and 1530 Feet From T	he <u>East</u>
Unit Letter U ; II			
Line of Section 6 To	wnship 27-N Range 8	-W , NMPM, San J	uan County
<u> </u>			
II. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	Address (Give address to which approve	ed copy of this form is to be sent)
Name of Authorized Transporter of O	or Condensate X	Address (Othe address to which opposit	
McWood Corpora	tion	Box 1702 - Farmington,	New Mexico
Name of Authorized Transporter of C	singhead Gas or Dry Gas X	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natura	l Gas Company	Box 990 - Farmington, N	ew Mexico
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When	n
give location of tanks.	0 6 27 8	No	On Approval
	ith that from any other lease or pool,	give commingling order number:	
If this production is commingled w IV. COMPLETION DATA	ith that from any other rease or poor,		La L
	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty. Diff. Resty.
Designate Type of Complet	$\operatorname{ion} - (X)$	X	1
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12-9-65	12-30-65	7565	7520
Elevations (DF, RKB, RT, GR, etc.)		Top Oil/Gas Pay	Tubing Depth
		7303	7502
Perforations			Depth Casing Shoe
1	303 - 7493		7565
	TUBING, CASING, AND	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15"	10-3/4"	221	150 Sacks
9-7/8"	7-5/8"	3125	425 Sacks
	4-1/2"	7565	425 Cu Ft 1st Stage
6-3/4"	2 2/8!!	7502	210 Cu Ft 2nd Stage
The state of the s	COP ALLOWARIE (Test must be a	after recovery of total volume of load oil	and must be equal to or exceed top allow
	able for this de		
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	t, etc.)
			Character City
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
			205
Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas-MCF
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	3 Hours		
6285 Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Back Pr.	404	980	3/4
			TION COMMISSION
VI. CERTIFICATE OF COMPLIA	HOL.	-	t + 1986 <b>, 19 </b>
	d regulations of the Oil Conservation	APPROVED	<u> </u>
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.			
	, , ,		andione with put 5 1104
<b>-1</b> / 1.	2 C Sichola		compliance with RULE 1104.
DINACIA	I II V WAAAAAA	If this is a request for allow	vable for a newly drilled or deepene
1/7 1/1/1/90			
harold C. Nichols (S		well, this form must be accompa	inied by a tabulation of the deviation o

Senior Production Clerk (Title)

October 13, 1966 (Date)

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 completed wells.