			1	
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SANTA FE	- 1	CONSERVATION COMMISSION	Form C •104	
FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 iffective 4-1-65	
U.S.G.S.	AUTHODIZATION TO TO	AND		
LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL G	45	
OIL	1			
RANSPORTER GAS				
OPERATOR	',- 			
T PROPATION OFFICE	'			
s persiter	i			
Tenneco O:	il Company			
	1714, Durango, Colorado 813	0-1		
Reasons) for filing (Check pro	on s) for filing (Check proper box) Other (Please explain)			
New Wel.	Change in Transporter of:			
Recompletion	Oil Dry G	Effective first	delivery.	
Thange in Cwnership	Casinghead Gas Conde	ensate		
If change of ownership give r				
and address of previous owns	27			
II. DESCRIPTION OF WELL	AND LEASE	ume, Including Formation	Kind of Lease	
Bolack "B"	4	Basin Dakota	State, Federal or Fee Federal	
0	925 Cauth	1770	77 4	
Unit Letter 0	Feet From The South Li	ne and 1770 Feet From Th	ne East	
Line of Section 30	, Township 27N Range	8W , NMPM, San Ju	an County	
Line of Section 30	, Township Z/N Range	8W , NMPM, San Ju	an County	
III DESIGNATION OF TRANS	SPORTER OF OIL AND NATURAL G	AS		
Name of Luthorized Trin. A rte		Address (Give address to which approve	d copy of this form is to be sent)	
Permian Cor	noration	P. O. Box 3119, Midland	, Texas	
Name of Futhorized Transporte	r of Casinghead Gas or Dry Gas X	Address (Give address to which approved copy of this form is to be sent)		
El Paso NAt	ural Gas Company	Company P. O. Box 990, Farmington, New Mexico		
If well projuces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When		
give locat on of tanks.	0 30 27 8	No On	Approval	
If this production is comming	ded with that from any other lease or pool,	give commingling order number:		
IV. COMPLETION DATA				
Designate Type of Con	Oll Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
		X	1	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
8/20/66	10/9/66	6698	6655	
Peo:	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Dakota	Dakota	6400	6594	
Perforations			Depth Casing Shoe	
6400-6476,			6698	
	· · · · · · · · · · · · · · · · · · ·	D CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
121/4	8-5/8			
<u> </u>	4-1/2	6698	810 sx.	
V. TEST DATA AND REQUE	CST FOR ALLOWABLE (Test must be	after recovery of total volume of load oil ar	id must be equal to or exceed top allow-	
OIL WELL	able for this d	lepth or be for full 24 hours)		
Date First New Oil Run To Tar	nks Date of Test	Producing Method (Flow, pump, gas lift,	erci Arren	
		Castan Pagasa	Chair / QII. FIVIA	
Length of Test	Tubing Pressure	Casing Pressure	Choke Szeff LULIV LU	

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,		OFF FILE
Length of Test	Tubing Pressure	Casing Pressure	Choke S	z-MINLIAFD /
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - M	PF MAR 3 0 1967
				OIL CON. COM.
GAS WELL				DiST. 3
Actual Frod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity	of Condensate

3 hours Casing Pressure Choke Size Testing Method (pitot, back pr.) Tubing Pressure Back pr. 201 586 3/4"

APPROVED

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 in true and complete to the best of my knowledge and belief.

Senior Production Clerk

(Title)

Tenneco Oil Company

Broiginal Signed by Emery C. Arnold SUPERVISOR D TITLE _

OIL CONSERVATION COMMISSION MAR 5 0 1967

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly diffled 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 Sections I, II, III, and VI only 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.