	NO. OF COPIES RECEIVED			j		
	DISTRIBUTION			i -		
	SANTA FE		7			
	FILE		1	۔ ی		
	U.S.G.S.					
	LAND OFFICE					
	TRANSPORTER	OIL	1			
		GAS	1			
	OPERATOR					
	PRORATION OFFICE					
	Operator					
	Tenneco Oil Com					
	Address					
	P. O. Box 1714 - Reason(s) for filing (Check proper ba					
i						

	DISTRIBUTION SANTA FE /	AND		Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65				
	U.S.G.S.  LAND OFFICE  IRANSPORTER OIL / GAS /  OPERATOR / PRORATION OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL (	GAS				
	Cherator Tenneco Oil Comp							
	Tenneco Oil Company							
	1	P. O. Box 1714 - Durango, Colorado						
	Reason(s) for filing (Check proper box)  New Well  Recompletion  Oil  Dry Gas  Other (Please explain)  Effective First Delivery							
	Change in Ownership Casinghead Gas Condensate							
	If change of ownership give name and address of previous owner							
**								
11.	Lease Name		ame, Including Formation	Kind of Lease				
	Florance	63	Basin Dakota	State, Federal or Fee Federal				
Location  [Intitation E . 1450 Feet From The North Line and 1190 Feet From The West								
Unit Letter E; 1450 Feet From The North Line and 1190 Feet From The West								
Line of Section 17 , Township 27-N Range 8-W , NMPM, San Juan County								
III.	DESIGNATION OF TRANSPOR  Name of Authorized Transporter of Of	TER OF OIL AND NATURAL GA	AS Address (Give address to which approx	ed copy of this form is to be sent)				
	Inland, Inc.	<u> </u>						
	Name of Authorized Transporter of Ca	singhead Gas or Dry Gas 🗶	P. O. Box 1528 - Farmington, New Mexico Address (Give address to which approved copy of this form is to be sent)					
	El Paso Natural Gas If well produces oil or Liquids,	Unit Sec. Twp. Rge.	P. O. Box 990 - Farming Is gas actually connected? Whe	gton, New Mexico				
	give location of tanks.	E 17 27 8	No	On Approval				
		ith that from any other lease or pool,	give commingling order number:					
1 .	Designate Type of Completion - (X)  Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.							
	,,	X	X Total Depth	D D T D				
	Date Spudded 10/23/66	Date Compl. Ready to Prod. 12/19/66	7627	P.B.T.D.				
	Pool	Name of Producing Formation	Top Oil/Gas Pay	7591 Tubing Depth				
	Dakota Perforations	Dakota	7378	7476 2-3/8"  Depth Casing Shoe				
	7378 - 7501			7627				
			D CEMENTING RECORD					
	HOLE SIZE 12-1/4"	CASING & TUBING SIZE 8-5/8"	DEPTH SET	400 sacks				
Ì	7-7/8"	4-1/2"	7627	3 stages, 800 sacks				
	<u> </u>	2-3/8"	7627					
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to a								
1	OIL WELL Date First New Oil Run To Tanks	able for this de	epth or be for full 24 hours)  Producing Method (Flow, pump, gas lif	t. etc.)				
	India i hat New Oil Fidn To Tunks	Date of Test	readering Montace (1 town pamps gas try	CHI ED				
	Length of Test	Tubing Pressure	Casing Pressure	C. Corri				
	Actual Prod. During Test	Oil - Bbis.	Water - Bbls.	Han-MCFR ZA COM.				
				MAR 24 COM				
	GAS WELL			OF DIST. S				
[	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity or Condens				
	4009	3 Hours						
	Testing Method (pitot, back pr.)	Tubing Pressure 270	Casing Pressure	Choke Size				
VI.	AOF Back Pressure CERTIFICATE OF COMPLIAN			TION COMMISSION				
			** MAR 2.4 1967					
	Commission have been complied a	regulations of the Oil Conservation with and that the information given	AFFROVED   13					
above is true complete to the best of my knowledge and belief.			By Original Signed by Emery C. Arnold SUPERVISOR DESCRIPTION					
	<i>1</i>	22 //	TITLE					
	2/	20-1-1		ompliance with RULE 1104.				
	G. A. Ford (Sign	eature)	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.					
	Senior Pro	oduction Clerk	All sections of this form mus	All sections of this form must be filled out completely for allow-				
	(Tüle) March 23, 1967		able on new and recompleted wells.					
		43, 190/	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.