NO. OF COPIES RECEIVED			•
DISTRIBUTION	NEW MEXICO OIL CO	ONSERVATION COMMISSION	Form C-104
SANTA FE /	REQUEST F	FOR ALLOWABLE	Supersedes Old C-104 and C-116 Effective 1-1-65
FILE /		AND	
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GA	NS
LAND OFFICE			
IRANSPORTER GAS /			
OPERATOR ,			
PRORATION OFFICE			
Operator			
Tenneco Oil Comp	any		
P. O. Box 1714,	Durango, Colorado 81301		
Reason(s) for filing (Check proper	box)	Other (Please explain)	
New Well	Change in Transporter of:	Effective fi	wat dolivery
Recompletion	Oil Dry Ga		ist delivery
Change in Ownership	Casinghead Gas Conder	nsate	
If change of ownership give named and address of previous owner _	e		
. DESCRIPTION OF WELL A	ND LEASE Well No. Pool Name, Including F	ormation Kind of Lease	Lease No.
Morris Com. "A"	1 Basin Dakota		or Fee Fed. SF 07732
	1 Duozii Duito		
Location Unit Letter;;	1450 Feet From The SouthLir	ne and 790 Feet From T	he West
	_	NMPM . Cara I	County
Line of Section 13	Township 27N Range	10W , NMPM, San J	iuan
		• 6	
I. DESIGNATION OF TRANSP	ORTER OF OIL AND NATURAL GA	As Address (Give address to which approv	ed copy of this form is to be sent)
Name of Authorized Transporter o	Oil or Condensate		
Plateau, Inc.	Day Geo.	P. O. Box 108 Farming Address (Give address to which approve	ded copy of this form is to be sent)
Name of Authorized Transporter o	Casinghead Gas or Dry Gas		
El Paso Natura	l Gas Company	P. O. Box 990 Farming Is gas actually connected? Whe	en New Mexico
If well produces oil or liquids,	Unit Sec. Twp. Rge.		2/1/69
give location of tanks.	<u> </u>		2/1/68
If this production is commingle	d with that from any other lease or pool,	, give commingling order number:	
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Rest
Designate Type of Comp	letion - (X)		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
i i		6620	6475
10/28/67 Elevations (DF, RKB, RT, GR, e		Top Oil/Gas Pay	Tubing Depth
		6410	6545
6121 Gr.	hasin bakota		Depth Casing Shoe
6410-6592			6619
0410-0392	TUBING, CASING, AN	ND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	469	320
6-3/4"	4-1/2"	6619	245 first stage
0-3/4			225 second stage
			225 third stage
V. TEST DATA AND REQUE	ST FOR ALLOWABLE (Test must be	after recovery of total volume of load oil	l and must be equal to or exceed top all
V. TEST DATA AND REQUES	able for this	depth or be jor juli 24 hours,	
Date First New Oil Run To Tani	B Date of Test	Producing Method (Flow, pump, gas l	.,,, 6,0,7
			Choke Size
Length of Test	Tubing Pressure	Casing Pressure	OFFICE
		Was Black	Gas-McF
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	7501 750
			
1			OIL CON. COM.
GAS WELL		This Continue And Co	Gravity of Cond Die
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	
7644	3 hrs	400-401	Choke Size
Testing Method (pitot, back pr.		Casing Pressure (Shut-in)	
васк Pr.	1895	1895	3/4
VI. CERTIFICATE OF COMP		OIL CONSERV	ATION COMMISSION
			FEB 15 1968
I heraby cartify that the rule	s and regulations of the Oil Conservation	on APPROVED	
Commission have been com	slied with and that the information give to the best of my knowledge and belief	on on Original Signed by	SUPERVISOR DIST. 非3
above is true and complete	to the past of mil whomsends and past		BUPERVISOR DIST. TO

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

TITLE .

M. K. Waguer

February 14, 1968

(Title)

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, 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.