	NO. OF COPIES RECI	EIVED	5	
I	DISTRIBUTIO			
SANTA FE		1		
	FILE U.S.G.S.		7	~
	LAND OFFICE			
	IRANSPORTER	OIL	7	
	GAS	[/]		
OPERATOR		1		
PRORATION OFFICE				

	DISTRIBUTION SANTA FE FILE U.S.G.S.	REQUEST FOR ALLOWABLE AND		Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65				
1.	LAND OFFICE IRANSPORTER OIL / GAS / OPERATOR / PRORATION OFFICE	AUTHORIZATION TO TRA		RECEIV				
	Operator TENNECO OIL COMPANY			NAMY 0.10.				
	Address							
	1200 Lincoln Tower Building, Denver, Colorado 80203 Colorado 80203 Other (Please explain)							
	New Well	Change In Transporter of:	Office (Freuse explain)	Dia				
	Recompletion Change in Ownership	Oil Dry Ga: Casinghead Gas Conden	s XX					
	If change of ownership give name and address of previous owner							
II.	DESCRIPTION OF WELL AND		[Visdof Love					
	Lease Name Florance	Well No. Pool Name, Including Fo	1	Lease No. 11 or Fee Fed. 080000				
Location								
	Unit Letter;	Feet From The South Line		The West San Juan County				
				Jan Gadan Galaky				
!!!. 	III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to							
	Permian Corp. Name of Authorized Transporter of Cas	Inghead Gas or Dry Gas	P. O. Box 3119, Midlar Address (Give address to which appro	nd, Texas 79701				
	El Paso Natural Gas	· ·	P. O. Box 990, Farmington, New Mexico 87401					
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.		7/2/68				
	If this production is commingled wit	th that from any other lease or pool,	1					
	Designate Type of Completion	on - (X) Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.				
	Date Spudded	Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.				
	4/3/66 Elevations (DF, RKB, RT, GR, etc.)	4/13/66 Name of Producing Formation	2195 * Top Oil/Gas Pay	2126 Tubing Depth				
	5629' GR	Blanco Pictured Cliffs	2073'					
	Perforations 2073-2095 t			Depth Casing Shoe				
	TUBING, CASING, AND CEMENTING RECORD							
	HOLE SIZE 12-1/4"	CASING & TUBING SIZE	1261	SACKS CEMENT				
	7-7/8"	3-1/2"	2192'	250				
v .	TEST DATA AND REQUEST FO			and must be equal to or exceed top allow-				
· · ·	OII. WELL Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours) Producing Method (Flow, pump, gas l	ift, etc.)				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size				
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF				
	Actual Floar Saling 1001							
	GAS WELL							
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size				
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERV	ATION COMMISSION MAY 8 1969				
	I hereby certify that the rules and regulations of the Oil Conservation		II .					
	Commission have been complied v	with and that the information given best of my knowledge and belief.	By Original Signed by Emery C. Arnold					
		r	SUPERVISOR DIST. #3					
	Dan U.	Coh	This form is to be filed in compliance with RULE 1104. 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.					
	(Signal Production Clerk	ature)						
	(Ti	tle)						
	5/6/69 (De	(Date)		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.					