ſ	NO. OF COPIES RECE	5		
-	DISTRIBUTION			
	SANTA FE		1	
Ì	FILE		1	V
	U.S.G.S.			
Ì	LAND OFFICE			
	TRANSPORTER	OIL		
1		GAS	1_	<u> </u>
	OPERATOR		1	
	PRORATION OFFICE			

	SANTA FE /		OR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65		
}	FILE / V	AUTHODIZATION TO TRAN	AND NSPORT OIL AND NATURAL GA	15		
}	U.S.G.S.	AUTHORIZATION TO TRAI	13FORT OIL AND HATOKAL OF			
ŀ	IRANSPORTER OIL /					
	GAS /					
	OPERATOR /					
1.	Operator Tennece					
	Reason(s) for filing (Check proper box	Box 1714, Durango, Colora	Other (Please explain)			
	New Well	Change in Transporter of:	Effective July	ı, 1966		
	Recompletion Change to Ownership	Oil Dry Gas Casinghead Gas Condens	' <u> </u>			
	Change in Ownership					
	If change of ownership give name and address of previous owner					
II.	DESCRIPTION OF WELL AND	LEASE Lease No. Well No. Pool Nam	ne, Including Formation	Kind of Lease		
	Lease Name Prichard		Blanco Mesaverde	State, Federal or Fee Fed.		
	Location			₽4		
	Unit Letter <u>H</u> ; <u>15</u>	90 Feet From The North Line	e and 940 Feet From T	he East		
	1 -	washin 30 N. Range	9 W , NMPM, Sa.	n Juan County		
	Line of Section To	wnship 30 N Range				
II.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GAS	S Address (Give address to which approv	ed copy of this form is to be sent)		
	Name of Authorized Transporter of Oil	eny Inland (orp)	P. O. Box 1528, Farmin	gton, New Mexico		
	Name of Authorized Transporter of Car	singhead Gas or Dry Gas XX	Address (Give address to which approved copy of this form is to be sent)			
	Southern Union Gath	ering Company	Fidelity Union Tower,			
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n 10/28/52		
	give location of tanks.	th that from any other lease or pool,		23/23/72		
IV.	COMPLETION DATA Designate Type of Completion	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
			Too Oll/Con Pay	Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			
	Perforations		1	Depth Casing Shoe		
			DEPTH SET	SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE	UEF I N SE I			
		ATTOMASTS (S	the secondary of social volume of land oil	and must be equal to or exceed top allow		
V.	TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be a able for this de	pth or be for full 24 hours)			
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lip	(t, etc.) SCPHVFN		
		Thible a December	Casing Pressure	Choly Statute		
	Length of Test	Tubing Pressure	J	1966		
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.			
				Gas MCFJUL SON. COM.		
	Actual Prod. Test-MCF/D Length of Test		Bbls. Condensate/MMCF	Gravity of Condensate		
				Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	CHORA DIZA		
			OIL CONSERVA	TION COMMISSION		
VI	. CERTIFICATE OF COMPLIAN	ERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION JUL 5 1966		
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED			
		with and that the information given ne best of my knowledge and belief.	By Original Signed by Emery C. Arnold			
	4	_	SUPERVISOR DIST. #3 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.			
	Harold C)					
	orarva c / f	more				
	1	nature)				
	Senior Production		All sections of this form must be filled out completely for allow			
		Title)	able on new and recompleted wells.			

(Date)

Fill out only Sections I. II. III. and VI for changes of owner, well name or number, or transporten or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.