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	SANTA FE / FILE / C-U.S.G.S.	REQUEST	ONSERVATION COMMISSION FOR ALLOWABLE AND NSPORT OIL AND NATURAL (Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65			
1.	. FRANSPORTER OIL GAS / OPERATOR 2 PRORATION OFFICE						
	Tenneco Oil Company	enneco Oil Company					
	Address Suite 1200 Lincoln Tow	rite 1200 Lincoln Tower Bldg., Denver, Colo. 80203					
Reason(s) for filing (Check proper box) Other (Please explain)							
	New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Ga Casinghead Gas Conden		for unloading fluid.			
	If change of ownership give name and address of previous owner						
11.	DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including Fo	l l	, Lease ite.			
	Florance "B"	2 Blanco Pictur	red Cliffs State, Federa	Fee Fed. SF080132			
		Peet From The North Lin	e and Feet From	The East			
	Line of Section 22 Tov	mship 30N Range	ЭW , _{NMPM} , San J	UE. II County			
111.	DESIGNATION OF TRANSPORT	FER OF OIL AND NATURAL GA	S Address (Give address to which appro	ned copy of this form is to be sent)			
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address to which appro				
	El Paso Natural Gas Co	Unit Sec. Twp. Rge.	Box 990, Farmington, N. Is gas actually connected? Wh				
	If well produces oil or liquids, give location of tanks.		Yes	Aug. 12, 1968			
IV.	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,					
	Designate Type of Completic	on – (X)	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.			
	Date Spudded 3-6-66	Date Compl. Ready to Prod. 3-24-66	Total Depth 2983	P.B.T.D. 2916'			
	Elevations (DF, RKB, RT, GR, etc.) 6107	Name of Producing Formation Blanco P. C.	Top Oil/Gas Pay 2847'	Tubing Depth 2980'			
	Perforations			Depth Casing Shoe			
	HOLE SIZE	TUBING, CASING, AND	DEPTH SET	SACKS CEMENT			
	12-1/4"	8-5/8"	107'	8U			
	7-7/8"	3-1/2"	2980'	515			
		1-1/4"	2852'				
V.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed able for this depth or be for full 24 hours)						
	Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	(t. etc.)			
	Length of Test	Tubing Pressure	Casing Pressure	OL 2			
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	OS POS			
	GAS WELL			3.0M			
	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.	I. 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		OIL CONSERVA	ATION COMMISSION MAR 7 1969			
			APPROVED, 19				
	above is true and complete to the	e best of my knowledge and belief.	By Original Signed by Emery C Arnold SUPERVISOR DIST. #5				
		()	THILE				
	Production Clerk (Sign	ature)	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 filled for each pool in multiply				
	·	tle)					
	3-5-69 (£)	sie)					
			;; completed wells.				