	no, or corres ascured 1 5			
	DISTRIBUTION	NEW MEXICO OIL (	CONFERMATION	
	SANTA FE		CONSERVATION COMMISSION FOR ALLOWABLE	Form C-104
	FILE / -	REGUEST	AND	Supersedes Old C-104 and C-11 - Effective 1-1-65
	U.S.G.S.	ALITHOPIZATION TO TO	ANSPORT OIL AND NATURAL C	
	LAND OFFICE	AOTHORIZATION TO TR	AND DATURAL C	)A)
	OIL /	~		
	TRANSPORTER GAS /			
	OPERATOR /	<b>-1</b>		
ı.	PROBATION OFFICE			
	Operator			
	Tenneco Oil Comp	any		
	Address	6 : 1000 5		
	1860 Lincoln St. Suite 1200, Denver, Colorado 80295			
	Reason(s) for filing (Check proper box	()	Other (Please explain)	
	New Well	Change in Transporter of:		
	Recompletion	Oil Dry G	ıs 🔲	
	Change in Ownership	Casinghead Gas Conde	nsate 🗓	
	If change of ownership give name and address of previous owner			
			-	***************************************
II. DESCRIPTION OF WELL AND LEASE *SF 078316				*SF 078316
	Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease			
	Florance 47A Blanco Mesa Verde State, Federal *			
	Location			
	Unit Letter J; 1505 Feet From The South Line and 1820 Feet From The East			
	Line of Section 5 To	waship 30N Hange	9W , NMPM,	San Juan County
		,		
I.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	is	
	Name of Authorized Transporter of Ot	or Condensate 🔀	Address (Give address to which approv	ed copy of this form is to be sent)
	Plateau, Inc.		Box 108, Farmington,	N.M. 87401
1	Name of Authorized Transporter of Casinghead Gas or Dry GasXX		Address (Give address to which approved copy of this form is to be sent)	
	Southern Union G	athering Company	P.O. Box 398, Bloomf	ield, New Mexico 87413
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe	
	give location of tanks.	J 5 30N 9W	Yes	10-13-76
	If this production is committed wi	th that from any other lease or pool,	give commingling order number	<del></del>
	COMPLETION DATA		<del></del>	
		Oll Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.
	Designate Type of Completion		X	
ŀ	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	5-11-76	6-28-76	5575'	5503'
Ì	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oli/Gas Pay	Tubing Depth
	6295 'GL	Blanco Mesa Verde	46531	5451'
	Perforations			Depth Casing Shoe
- [	5433'-5175'= 1	4 Holes;	4853'-4653'= 12 Holes	·
1		TUBING, CASING, AND	CEMENTING RECORD	
Ì	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
Ì	12-1/4"	9-5/8" Casing	228	200 Sacks
ł	8-3/4"	7" Casing	3393'	453 Sacks
ŀ	6-1/8"	4-1/2" Casing Ln	3156'-5575'	200 Sacks
ľ		2-3/8" Tubing	5451'	None
,	TEST DATA AND DECUEST F		fter recovery of total volume of load oil o	
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL  (Test must be after recovery of total volume of load oil and must be exist to able for this depth or be for full 24 hours)				
Ī	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift	i, etc.)
		1	-	$\sim f^{-1/2}$ and $\sim 10^{-1}$
-	Length of Test	Tubing Pressure	Casing Pressure	Cho size
İ				
-	Actual Prod. During Test	Ott-Bb(s.	Water-Bbls.	Gas-MCF
	-			012 651.3
1_			J	
	GAS WELL	•		
٢	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	9901 AOF	3 Hours	-0-	_
+	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Comp Pressure (Shut-in)	Choke Size
	Back Pressure	641	647	3/4"
L	<del></del>			+
(	CERTIFICATE OF COMPLIANCE	LE	OIL CONSERVA	TION COMMISSION
	handy positive that the out-s and semilations of the Oil Consequence		APPROVED, 19	
Į	hereby certify that the rules and regulations of the Oil Conservation commission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		BY Original Signed	
8				
			TITLE	
	.Z)21			
	41.41.	Mers		
_	(Signature) : Division Production Manager		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111.	
-	(Tie		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.	
	1-5	•		
-	(Da	te)		
	·	į		be filed for each pool in multiply
		The state of the s	completed wells.	and the second of the second o