	DISTRIBUTION SANTA FE		DISERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
_	U.S.G.S. LAND OFFICE	AUTHORIZATION TO TRA	AND NSPORT OIL AND NATURAL	GAS	
	OPERATOR / PRORATION OFFICE				
	Tenneco Oil Company Iddress				
	1860 Lincoln, Suite 120 Reason(s) for filing (Check proper box) New Well Recompletion	Change in Transporter of: Oil Dry Ga	Other (Please explain)		
L	Change in Ownership	Casinghead Gas Conden			
	DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Well No. Pool Name, Including Formation Kind of Lease No.				
	Lease Name Florance	14A Blanco Mesa V	Officiation Communication	ral or FeeFederal	
	Unit Letter C; 870 Feet From The North Line and 1455 Feet From The West				
Į	Elite of Section	1511p 3011	W , NMPM, San .	Juan	
III.]	Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)				
	Southern Union Gathering Well produces oil or liquide,		Is gas detadify commentati	ield, N.M. 87413 When Near Future	
	give location of tanks. If this production is commingled wit	th that from any other lease or pool,	NO give commingling order number:	Near rucure	
IV.	COMPLETION DATA Designate Type of Completic		New Well Workover Deepen	P.B.T.D.	
	Date Spudded 5-1-76	Date Compl. Ready to Prod. 11-8-76 Name of Producing Formation	Total Depth 5470' Top Oil/Gas Pay	5437 Tubing Depth	
	6284 GL Perforations (DF, RKB, RT, GR, etc.)	Blanco Mesa Verde	4647	5382 Depth Casing Shoe	
	Perforations 14 holes from 5372'-5122' & 15 holes from 4906'-4647' TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT SACKS CEMENT				
	HOLE SIZE 12-1/4"	CASING & TUBING SIZE 9-5/8" Casing 7" casing	224'	250 sacks 450 sacks	
	8-3/4" 6-1/4"	4-1/2" liner 2-3/8" tubing	2917'-5469' 5382'	280 sacks	
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 to able for this depth or be for full 24 hours) OIL WELL Producing Method (Flow, pump, gas lift etc.)				
	Date First New Oil Run To Tanks	Date of Test Tubing Pressure	Casing Pressure	Choke Size 4 6 1976	
	Length of Test Actual Prod. During Test	Oil-Bble.	Water-Bbis.	OIL CON COM.	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate - ()-	
	5023 AOF Testing Method (pitot, back pr.)	3 Hours Tubing Pressure(Shut-in) 353	Casing Pressure (Shut-in) 535	Choke Size 3/4	
VI	back pressure 555 CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
	I hereby certify that the rules and Commission have been complied	regulations of the Oil Conservatio with and that the information give he best of my knowledge and belief	n APPROVED	ny A. R. Kond rick	

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

	D.A. Mary
_	(Signature)
	Division Production Manager

(Title)

(Date)

TITLE _ 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.

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