

BUREAU OF OIL CONSERVATION COMMISSION
 REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

W-14-1007
 Expires 7/18/79
 Effective 1/1/77

DATE 1/17
 FIELD OFFICE
 TRANSPORTER OIL
GAS
 OPERATOR 1

I. REGISTRATION OFFICE
 Operator: Tenneco Oil Company
 Address: 720 S. Colorado Blvd., Denver, CO 80222
 Reasons for filing (Check proper box):
 New Well Change in Transporter of: Oil Dry Gas
 Recombination Condensed Gas Condensate
 Change in Ownership

If change of ownership give name and address of previous owner: Palmer Oil and Gas Co., P.O. Box 2564, Billings, MT 59103

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Yager</u>	Well No. <u>1</u>	Pool Name, Including Formation <u>Blanco Mesa Verde</u>	Kind of Lease State, Federal or Fee Fee	Lease No.
Location: Unit Letter: <u>E</u> , <u>1700</u> Feet From The <u>North</u> Line and <u>850</u> Feet From The <u>West</u> Line of Section <u>10</u> Township <u>31N</u> Range <u>7W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Gasineous Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent): <u>P.O. Box 1526, Salt Lake City, Utah 84110</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. is gas actually connected? When: <u>Yes</u> <u>11/15/77</u>

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deeper	Plug Back	Same Res't.	Diff. Res
Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top oil able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. 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 above is true and complete to the best of my knowledge and belief.

[Signature]
 Administrative Supervisor

OIL CONSERVATION COMMISSION

APPROVED 1/17/77, 1977
 BY Original signed by CHARLES GHOLSON
 TITLE DEPUTY OIL & GAS INSPECTOR, 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 deeper well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.
 All sections of this form must be filled out completely for all wells on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter or other such change of conditions. Forms O-104 must be filed for each pool or well.