

DISTRIBUTION 4
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 S.D.S.
 LAND OFFICE
 TRANSPORTER OIL
 GAS 1
 OPERATOR
 REGISTRATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
 REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FILE 10/17
 Supervisors Gas, Oil, and C
 Executive Dept.

1. Operator: **Tenneco Oil Company**
 Address: **720 S. Colorado Blvd., Denver, CO 80222**
 Reasons for filing (Check proper box):
 New Well ☐ Change in Transporter of:
 Recompletion ☐ Oil ☐ Dry Gas ☐
 Change in Ownership ☒ Casinhead Gas ☐ Condensate ☐
 If change of ownership give name and address of previous owner: **Palmer Oil & Gas Co., P.O. Box 2564, Billings, MT 59103**

II. DESCRIPTION OF WELL AND LEASE
 Lease Name: **Yager** Well No.: **1B** Pool Name, including Formation: **Blanco Mesa Verde** Kind of Lease: **State, Federal or Fee** Fee: **Fee**
 Location: Unit Letter: **N** **800** Feet From The **South** Line and **2480** Feet From The **West**
 Line of Section: **3** Township: **31N** Range: **7W**, NMPM, **San Juan** County:

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
 Name of Authorized Transporter of Oil ☐ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent):
 Name of Authorized Transporter of Casinhead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent):
Northwest Pipeline Corporation **P.O. Box 1526, Salt Lake City, Utah 84110**
 If well produces oil or liquids, give location of tanks: Unit: Sec: Twp: Rge: Is gas actually connected? **Yes** When: **4/7/78**

IV. COMPLETION DATA
 Designate Type of Completion - (X) Oil Well Gas Well New well Workover Deeper Plug Back Same Restv. Diff. Rest
 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 allowable 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: *[Signature]*
 Administrative Supervisor

OIL CONSERVATION COMMISSION
 APPROVED **JAN 10 1980**, 19____
 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 deep well, this form must be accompanied by a tabulation of the devils 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 oil well name or number, or transporter or other such change of conditions. Forms 1-104 must be filed for each well to which

DATE	
FILE	
CLASS	
APPROVED	
TRANSPORTER	
OPERATOR	
PERMITTING OFFICE	
Comments	

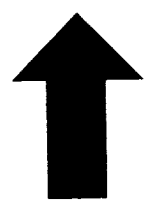
SANTA FE, NEW MEXICO 87501

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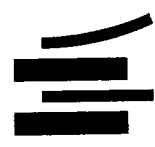
QUINOCO PETROLEUM, INC.

Address

3801 E. FLORIDA AVENUE, PO BOX 10800, DENVER COLORADO 80210-0800



LTR



Job separation sheet