| DISTRIBUTION | REQUEST F | NSERVATION COMMISSION OR ALLOWABLE AND | Form C-104 Supersedes (Ild C-104 and C-110 Effective 1-1-65 |
|--|--|---|---|
| AU | THORIZATION TO TRAN | ISPORT OIL AND NATURAL GAS P 3 10 45 AN 765 | |
| RANSPORTER | | · · · | |
| OPERATOR | | | · · · · · · · · · · · · · · · · · · · |
| Tenneco Oil Company | | | |
| A 1 179.000 | | | |
| Box 1031, Midland, Texas Reason's, for filing of these proper bary | | Other (Please explain) | 12 from Couth Isna |
| | nge in Transported et: | Change name of fie Pennsylvanian | Id Irom South Lane |
| | inghead Gas 🔄 Statema | 40 | |
| If change of ownership give name and address of previous owner | | | |
| H. DESCRIPTION OF WELL AND LEASE | Well Mo. Pec. Num | e, Inclusing Formation Ki | nd of Lease |
| State "EF" Une (CAL | | | ate, Federal or Fee State |
| Location Unit Letter <u>P : 660</u> Pe | et From The South Line | and660Feet From The | east |
| tane of them at 6 Themesia | 11-S Barriero B | 4-E , NMPM, Lea | Connty |
| III. DESIGNATION OF TRANSPORTER OF | OIL AND NATURAL GAS | Address (Give address to which approved a | copy of this form is to be sent) |
| Service Pipe Line Company Name of Authorized Transporter of Casimaneau Warren Petroleum Corporati | Amoco Pipeline Co: Sas X or Dry Gas | Box 337, Midland, Texa Address (Give address to which approved Box 966, Lovington, Ne | copy by this joint is to be demy |
| if well produced a strain figure in the strain of true a strain of true a strain of true a strain st | Sec. Twp. Bar. 6 11-S 34-E | is gas actually connected? When Yes | 3-20-63 |
| irec. finne o | ompl. Heady to Prod. | Top Oil/Das Pay T | ubing Cepts |
| Perioritana | | | epth C issuer Shoe |
| ∩û_ë SIZEC | TUBING, CASING, AND ASING & TUEING SIZE | CEMENTING RECORD DEPTH SET | SACKS CEMENT |
| | | | |
| | | | |
| V. TEST DATA AND REQUEST FOR ALL OIL WELL Date First New ALLS AND TAXAN A DESCRIPTION | able for this de | ter recovery of total colume of load oil and pth or be for full 24 hoursy - Froducture Methew (Flow, pump, gas lift, e | |
| Length of Text | Pressure | Casing Freesure C | Ticke Size |
| Actual Front Lorder Foot | <i>y</i> 53. | Water-Buis. | Gas - MCF |
| | | i I | |
| GAS WELL | | Bella, Cendensate/MMCF | Wavity of Condensate |
| Actual Front Tour-MDF/Dy Length | i ci Test | | |
| Testing Metress (stor, back pr.) Turing | Pressure | | Choko l'itte |
| VI. CERTIFICATE OF COMPLIANCE | | OIL CONSERVAT | ION COMMISSION |
| I hereby certify that the rules and regulati Commission have been complied with and above is true and complete to the best o | | BY | , 19 |
| | | TITLE | |
| 2 fCo mes | J.F. Carnes | This form is to be filed in cor If this is a request for allowad | te for a newly drilled or deepene |
| Bistrict Production Fores | | well, this form must be accompanie tests taken on the well in accorda | nce with RULE 111. |
| (Title) | | able on new and recompleted well | be filled out completely for allow s. nd VI only for changes of owner |
| September 1, 1965 | | Fill our Sections I, II, III, and VI only 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 multipl completed wells. | |

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