	WD OF (0*128 BECEIVLD	• erit -	•			
	DISTRIBUTION SANTA FE		CNSERVATION COM JION FOR ALLOWABLE AND		Form C-104 Supersedes Old C-106 and C Effective 1-1-65	
	FILE	REQUEST I				
	U.S.G.S.	AUTHORIZATION TO TRA				
	LAND OFFICE		NO ORT OIL AND NAT	URAL GAS		
	TRANSPORTER OIL	- ·				
	GAS OPERATOR	4				
1.	PRORATION OFFICE	4				
••	Cperator	1				
	Tenneco Oil Company					
	Address 720 So Colorado Blu	vd., Denver, Colorado 80	10 00			
	Reason(s) for filing (Check proper box,		Other (Please exp	laint		. <u> </u>
	New Well	Change in Transporter of:		iony i		
	Recompletion	Oll Dry Gas				
	Change in Ownership	Castrighead Gas X Cunder.	sate			
	If change of ownership give name					
	and address of previous owner		· · · · · · · · · · · · · · · · · · ·			
Н.	DESCINI NO. OF WEDE MODELS				M-0117529	
	Lesse Name	Well No. Pool Name, Including Fo		d of Lense		Lesse No
	Federal 21	1 Chaveroo San	Andres Stat	e, Federal or Fe	• Federal	*
	Location	660 Wost	660		South	
	Unit Letter M;	660 Feet From The West Line	and 000 F	eet From The	<u>- 300th</u>	
	Line of Section 21 Toy	mshtp 75 Bange	33E , NMPM,		Roosevelt	Count
ш.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	S Address (Give address to wh	ich approved and		
	Acre of Automized Persporter of Ch			nen approvea coj	py of this form is t	o be sentj
	Name of Authorized Transporter of Car	singhead Gas 🔀 or Dry Gas 🚞	Address (Give address to wh	ich approved coj	oy of this form is 1	o be sent)
	Cities Service Company		Box 300, Tulsa,			•
	If well produces oil or liquids,	Unit Sec. Twp. Ege.	is gas actually connected?	When		
	give location of tarks.					
11/		th that from any other lease or pool,	give commingling order nur	nber:		·
SV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover D	eepen Plug	Back Same Res	v. Diff. Re:
	Designate Type of Completic					1
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.3	T.D.	
	Elevations (DF, RKB, RT, CR, etc.)	Name of Froducing Formation	Top CU/Gas Pay	Tub	lag Depth	
	Perforations			Dept	th Casing Shoe	
						<u> </u>
		TUBING, CASING, AND	·····	·····		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEN	ENT
		· · · · · · · · · · · · · · · · · · ·				
		·				
	L		1	i		
v.		OR ALLOWABLE (Test must be af able for this de	fter recovery of total volume o pth or be for full 24 hours)	fload oil and mi	ist be equal to or e	exceed top al
	OIL WELL Date First New Cil Run To Tanks	Froducing Method (Flow, pump, gas lift, etc.)				
	Length of Test	Tubing Pressure	Casing Pressure	Che	ke Size	
	Actual Prod. During Test	011-2516.	Water-Bbls.	Gas	-MCF	
	Keisal Pies, Daning Tort			028	- 1001	
	GAS WELL					
	Actual Frod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gre	vity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shat-in)	Casing Pressure (Shut-in			
	. esting Method (pirot, back pri)	Toping Field (SERC-IN)	Correction Lines (Dares - 14) Cho	ke Size	
178	CERTIFICATE OF COMPLIAN	CE				 N
¥ 1.	CERTIFICATE OF COMPERATOR					
	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.		APPROVED			
			BY Crig. Signed by Les Clements			
			Les Clementa			
			TITLE			
	(Signative)		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepe			
	(Sign	sture)	well, this form must be accompanied by a tabulation of the dev		of the devia	
	Division Productio	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for all				
	(T)	sble on new and recom	plated walls.			
		Fill out only Sections I, II, III, and VI for changes of owr well name or number, or transporter, or other such change of condit: Separate Forms C-104 must be filed for each pool in mult:				
	(D					
		annation matte				

F.L.

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FEB 3 1978 OIL CONSERVATION COMM. HOBBS, N. M.