	NO. OF COPIES RECEIVED	7 _							
	DISTRIBUTION								
	SANTA FE	REQUEST	Supersedes Old C-104 and C-110 Effective 1-1-65						
	FILE U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							
	LAND OFFICE								
	IRANSPORTER OIL	TRANSPORTER OIL AUG 13 4 2 AN '68							
	GAS OPERATOR								
Ι.	PRORATION OFFICE		·						
	Operator								
	Tenneco Oil Company								
	P. O. Box 1031 Midland, Texas 79701								
	Reason(s) for filing (Check proper box	ange from Shell Oil Co.							
	New Well	o change well name and							
	Recompletion Oil Dry Gas number from "State MQ", Well No. 1 to   Change in Ownership Casinghead Gas Condensate "Mesa Queen Unit", Well No. 14.								
	Effective 8-1-68								
	and address of previous owner	f change of ownership give name Shell Oil Company, P. O. Box 1858, Roswell, New Mexico 88201							
п	DESCRIPTION OF WELL AND								
	Lease Name	Lease No. Well No. Pool Nar	ne, Including Formation	Kind of Lease					
	Mesa Queen Unit	0G-6014 14 Mesa	Queen	State, TXDEXXXXXX					
	-	310 Feet From The South Lin	e and Feet From	The West					
	Unit Letter;	Feet From TheLin							
	Line of Section 16 To	wnship 165 Range	<u> 32Е , ммрм, I</u>	ea County					
<b>f</b> 11	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s						
	Name of Authorized Transporter of Oll		Address (Give address to which appro	ved copy of this form is to be sent)					
	Texas-New Mexico Pipe	Line Company	P. 0. Box 1510 Midlar	nd, Texas 79701					
	Name of Authorized Transporter of Ca		Address (Give address to which appro	_					
	Phillips Petraleum Co	Unit Sec. Twp. Rge.	Phillips Bldg. Odessa Is gas actually connected?	ien (9760					
	If well produces oil or liquids, give location of tanks.	l 16 165 32E	Yes	Unknown					
	If this production is commingled wi	th that from any other lease or pool,	give commingling order number:						
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.					
	Designate Type of Completi								
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
		Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation							
	Perforations	Depth Casing Shoe							
	TUBING, CASING, AND CEMENTING RECORD								
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
v	TEST DATA AND REQUEST E	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	l and must be equal to or exceed top allow-					
•	OIL WELL								
	Date First New Oil Run To Tanks	Date of Test	producing Method (r tow, pump, gas t	<i>(</i> ), <i>(</i> , <i>c</i> , <i>c</i> , <i>j</i> )					
	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 (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size					
	Testing Method (phot) occu phy								
VI	. CERTIFICATE OF COMPLIAN	ICE	OIL CONSERV	ATION COMMISSION					
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given			3966					
			APPROVED	Duration					
	above is true and complete to th	he best of my knowledge and belief.	BY John W. Annyan						
			TITLE						
	1			compliance with RULE 1104.					
	( L. T. Con	mes J.F. Carnes	If this is a sequent for alloweble for a newly drilled or deepened						
		nature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.						
	District Prod	luction Engineer	All sections of this form m sble on new and recompleted w	just be filled out completely for allow-					
	August 7		Eill out only Sections I	II III and VI for changes of owner,					
	]]	Date)	well name or number, or transpo	rter, or other such change of condition					

Separate Forms C-104 must be filed for each pool in multiply completed wells.







## **Job separation sheet**

NO. OF COPIES RECEIVED		$I_{\rm CCM}$	· · · ·	Form C-103
DISTRIBUTION		· · · ·		Supersedes Old
SANTA FE	C-102 and C-103 Effective 1-1-65			
FILE		MEXICO OIL CONFERVA	3 50 34	
U.S.G.S.			- 33 M 166	5a. Indicat Type of Lease
AND OFFICE			00	State Fee.
OPERATOR				5.02+6014 Gas Lease No.
	SUNDRY NOTICES A	ND REPORTS ON WELL OR TO DEEPEN OR PLUG BACK TO (FORM C-101) FOR SUCH PROPI	_S A DIFFERENT RESERVOIR. DSALS.)	7. Un <b>#</b> Agreement Name
. Nahedf Ordibr Company	OTHER- V (Western Divis	ion)	<u>.</u>	State Mame
. Alonsslø Ølera Midland	, Texas			1. Well No.
, Location of Well L	2310	south	660	1. Well No.
Location of Well L UNIT LETTER West	2310 	SOUTH	E AND FEE'	T FROM
Location of Well L UNIT LETTER West	2310 	FROM THE LIN	E AND FEE' 32 RANGE	T FROM
Location of Well L UNIT LETTER West THE LINI	2310 	TROM THE LIN 	E AND FEE' 32 RANGE T, GR, etc.)	T FROM
Location of Well L UNIT LETTER West THE LINI 6. C	2310 	TROM THE LIN TOWNSHIP 59thon jp now whether DF, RT Box To Indicate Nature	E AND FEE' 32 RANGE T, GR, etc.) of Notice, Report of	T FROM
Location of Well L UNIT LETTER West THE LINI 6. C NOTICE PERFORM REMEDIAL WORK	2310 	TOWNSHIP LIN	e and FEET <b>32</b> Range F, GR, etc.) Tof Notice, Report of SUBSEQ DIAL WORK	T FROM NMPM. Lea <sup>County</sup> Dr Other Data DUENT REPORT OF: ALTERING CASING
West THE LINI 6. C	2310 	TROM THE LIN TOWNSHIP LIN TOWNSHIP LIN LIN TOWNSHIP LIN LIN	E AND FEET 32 RANGE F, GR, etc.) F of Notice, Report of SUBSEQ DIAL WORK	т FROM NMPM. Lea <sup>County</sup> Dr Other Data DUENT REPORT OF:

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent autes, including estimated unte work) SEE RULE 163. Installed 34-57D Parkersburg Pumping Unit with 7 1/2 HP electric motor.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED	Original Signed By R. J. Doubek	R. J. Doubek	Division Mechanical Engineer	Jan. 31, 1966
APPROVED BY	<	<u> </u>	TITLE	DATE
CONDITIONS C	F APPROVAL, IF ANY	1		