DISTRIBUTION SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65								
U.S.G.S.	AUTHORIZATION TO TRAN	AND ISPORT OIL AND N	ATURAL G	*							
LAND OFFICE IRANSPORTER OIL	. •	N									
GAS OPERATOR											
PRORATION OFFICE .					\neg						
Tennec	o Oil Compa	ny									
Suite 1200 Line Reason(s) for filing (Check proper box)	John Tower Bldg	Denver Other (Please	Ci-lo.	80203							
New We!!	Change in Transporter of: Oil Dry Gas	_ Effec	tive 1								
Recompletion Change in Ownership	Casingheud Gas Condens		Weste.	on Crude Oil Ins	•						
If change of ownership give name and address of previous owner	,										
DESCRIPTION OF WELL AND L	EASE. Well No. Fool Name, Including For	rmation	Kind of Lease	, Lesse N	io.						
MONSANTO Star	1	Delaware	State, Federal	or Fee State F.098	<u>7-1</u>						
Location Unit Letter \angle : 165	O Feet From The South Line	and 23/0	Feet From T	ne West							
	nship 25 Range	32 , NMFM,		Lea Cour	ty						
. DESIGNATION OF TRANSPORT	FR OF OIL AND NATURAL GAS	5	•	¢ .							
Name of Authorized Plansporter of Cil	cr Condensate	Address (Give address to	o which approv	ed copy of this form is to be sent,	2_						
Name of Authorized Transporter of Cast	ne Line CO	Address (Give address t	so which approv	ed copy of this form is to be sent)							
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connecte									
give location of tanks. If this production is commingled with	0	give commingling order	number:								
COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same Res'v. Diff. R.	 38 ' Y.						
Designate Type of Completion	n - (X) Date Compl. Recay to Prod.	Total Depth	<u> </u>	P.B.7.D.							
	Name of Producing Formation	Top Sti/Gas Pay		Tubing Depth							
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	100 011/ 003 1 01		Depth Casing Shoe							
Perforations			•								
HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	CEMENTING RECOR		SACKS CEMENT							
					·						
V. TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be at	ter recovery of total volu pth or be for full 24 hours	ime of load oil	and must be equal to or exceed top	illow						
OIL WELL Date First New Cii Run To Tanks	Date of Test	Producing Method (Flow		(t, etc.)							
Length of Test	Tubing Pressure	Casing Pressure		Choke Size							
Actual Prod. During Test	Ott-Bbls.	Water-Bbls.		Gds • MCF							
	<u></u>		· · · · · · · · · · · · · · · · · · ·	<u>.</u>							
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	F	Gravity of Condensate	<u> </u>						
	Tubing Pressure (Shut-in)	Casing Pressure (Shut	-in)	Choke Size							
Testing Method (pitot, back pr.)	Tubing Pressure (Entit-In)										
1. CERTIFICATE OF COMPLIAN	CE	OIL		22 1972 19 19							
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		Orig. Signed by							
		TITLE		Joe D. Ramey Dist. I, Supp.							
00	2	This form is t	o be filed in	compliance with RULE 1104.							
Do. Production Clark 5/11/7		If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of owner, well name or number, or transporter, or other such change of condition.									
						/ · /w	nte)	Separate Form	na C-104 mus	at be filed for each pool in mu	ltiply

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M//Y 2 2 1972

OIL CONSERVATION COMM. HOBBS, N. M.

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