STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.B.			
LAND OFFICE			
TRANSPORTER	OIL	I	
	GAS	1	
OPERATOR			
PROBATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Revised 10-01-78
Format 08-01-83
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Form C-104

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS II. Operation American Exploration Company		
	Other (Please explain) ry Gas ondensate	
If change of ownership give name Tesoro Petroleum Corporand address of previous owner	ration, 8700 Tesoro Drive, San Antonio, Texas 78	
II. DESCRIPTION OF WELL AND LEASE		
Santa Fe Railroad 88 Hospah Lower		
Location Unit Letter \underline{P} : $\underline{1140}$ Feet From The \underline{South} Lin	e and 895 Feet From The East	
Line of Section 1 Township 17N Range 9W	, NMPM, McKinley County	
Name of Authorized Transporter of Oil or Condensate Ciniza Pipeline Name of Authorized Transporter of Casinghead Gas or Dry Gas Unit Sec. Twp. Rgs.	P. O. Box 1887, Bloomfield, N.M. 87413 Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks. B 1 17N 9W	is das decidally connected?	
If this production is commingled with that from any other lesse or pool, NOTE: Complete Parts IV and V on reverse side if necessary.	give commingling order number:	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSEPTATION	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.	APPROVED Bird. Change 19	
	TITLE SUPERVISION DISTRICT # 3	
(Signature) Roy Quiroga Production Administrator	This form is to be filed in compliance with RULE 1104. If this is a request for silowable 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.	
August 22, 1988	All sections of this form must be filled out completely for allowable on new and recompleted wells. Fitl out only Sections I. II. III. and VI for changes of owner.	
(Date)	well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.	