## STATE OF NEW MEXICO **ENERGY AND MINERALS DEPARTMENT**

NO. OF COPIES RECE	IVED	_
DISTRIBUTION	ı ———	
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROPATION OFFICE		-

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

TRANSPORTER GAS REQUEST F	OR ALLOWABLE #:
CORP. TOP	<b>2</b>
PROPATION OFFICE AUTHORIZATION TO TRANS	AND SPORT OIL AND NATURAL GAS
1.	
Operator	Ocr
Tenneco Oil Company - Management	O// CO 1985
P.O. Box 3249, Englewood, CO 80155	J'L CON -
Reason(s) for filing (Check proper box)	Diez Olv
	Other (Please explain)
New Well Change in Transporter of:	
Recompletion	
Change in Ownership Casinghead Gas Condensate	•
	ny, P.O. Box 4990, Farmington, NM 87499
II. DESCRIPTION OF WELL AND LEASE  Lease Name  Well No.   Pool Name Including For	
Tool Haile, including ton	State, Federal or Fee LISA
SJ 28-7 Unit 97 So. Blanco-F	PC, SF 078640
Location	
Unit Letter A : Feet From TheNor	th Line and 990 Feet From The East
Line of Section 21 Township 27N	Range 71.1 NMPM D.: - A .: County
7/1	Hange 7W , NMPM, Rio Arriba County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil Grove Condensate G.	Address (Give address to which approved copy of this form is to be sent)
X	Assessed force deduces to which approved copy of this form is to be sent)
Conoco Inc. Surface Transportation  Name of Authorized Transporter of Casinghead Gas □ or Dry Gas □,	P.O. Box 460, Hobbs, NM 88240
^	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P.O. Box 4990, Farmington, NM 87499 Is gas actually connected?
Unit Sec. Twp. Rge.	Is gas actually connected?
give location of tanks. A 21 27N 7W	Yes
If this production is commingled with that from any other lease or pool, give commingling order number	
NOTE: Complete Parts IV and V on reverse side if necessary.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied	APPROVED TO A TOP TO THE TOP TO T
with and that the information given is true and complete to the best of my knowledge and belief.	
	BY Jank
	TITLE SUPERVISOR DISTRICT 器 3
Stold M-Knuy (Signature)	
(Signature)	This form is to be filed in compliance with RULE 1104.
Gr. Regulatory Analyst	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.
nct 1 1985	All sections of this form must be filled out completely for allowable on new and recompleted walls.
001 1 1000	Fill out only Section I, II, III, and VI for changes of owner, well name and or number, or transporter,
(Date)	or other such change of condition.
(5-410)	Separate Forms C-104 must be filed for each pool in multiply completed wells.