STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RE	CEIVED		
DISTRIBUTION	ON		
SANTA FE		\top	
FILE			
U.S.G.S.			
LAND OFFICE		Т	
	OIL	T	
TRANSPORTER	GAS	\top	
OPERATOR		\top	

OIL CONSERVATION DIVISION

Form C-104

Page 1

Revised 10-01-78 Format 06-01-83

P.O. BOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE

	AND			
ALITHORIZATION TO	TRANSPORT	OIL AND	NATURAL	GAS

OPERATOR			AND				
PRORATION OFFICE	AUTHORI	ZATION TO TRA	NSPOR"	OIL AND NATUR	RAL GAS	or a	
Operator						· 一种 V 益	
<u> Tenneco Oil Company - V</u>					<u>Uil</u>		
Address					00	T 02 1985	Same 1
P.O. Box 3249, Englewood,	CO 8015	55		Other (Please ex			
Reason(s) for filing (Check proper box)				Other (/ Jease ox	OIL (ON. DIV.	
New Well Change in Trans	porter of:	П			E	DIST 3	
Recompletion Uil		Dry Gas					}
Change in Ownership	d Gas	Condensate					
If change of ownership give name							
and address of previous owner F1_Pa	so Natur	cal Gas Comp	, ערופנ	P.O. Box 4990	O, Farmingto	on, NM 87499	
II. DESCRIPTION OF WELL AND LEAS	SE Well No.	Pool Name, Including	Formation		Kind of Lease		Lease No.
Lease Name					State, Federal or Fee	USA	
SJ 28-7 Unit	150	So. Blanco)PC		1	SF	078835
Location				•			
Unit Letter : _825		_ Feet From The	lorth.	Line and		Feet From The West	
Line of Section 6	Township	27N	Ran	^{ge} 7₩	, NMPM,	- Rio Arriba	County
III. DESIGNATION OF TRANSPORTER		ND NATURAL GA	AS		h annound carry of this	form is to be sent	
Name of Authorized Transporter of Oil or Conden	sate □ X		Adx	lress (Give address to which	en approved copy or this	tomi is to be sent,	
Conoco Inc. Surface Transp Name of Authorized Transporter of Casinghead Gas	ortation	1	<u></u>	O Box 460 Iress (Give address to which	Hobbs NM 4	38240 ha conti	
Name of Authorized Transporter of Casinghead Gas	or Dry Gas 🗆	(Add	iress (Give address to which	on approved cupy or this	iom is to be sem,	
Fl Paso Natural Gas Compan	V		P	O Box 4990 as actually connected?	, Farmington	n, NM 87499	
i uni	Sec.	Twp. Rge.	ls ç	as actually connected?	veneri	•	
If well produces oil or liquids, give location of tanks.	- 6		zw	Yes			
If this production is commingled with that from any other	er lease or pool, g	ive commingling order n	umber				
NOTE: Complete Parts IV and V on re	everse side	ir necessary.					
			п		ALL-GANICEDI/AZ	IAM DIVISION	
VI. CERTIFICATE OF COMPLIANCE			- 11.		alt doire and	NOISIVIDIA NO D	10
I hereby certify that the rules and regulations of the C	il Conservation	Division have been com		PPROVED	· .7		, 19
with and that the information given is true and comp	nete to the best	of my knownedge and i	B	v S	. / / (4)	/ /	
/)	>					avez	
V 4- 201	//		T	TLE	Areas Dimena, 25	· <i>0</i>	
Switt Mil	times			This form is to be filed in	compliance with RH F	1104	
(Signature				If this is a request for all			s form must be accom-
			pa	inled by a tabulation of th	ne deviation tests taken	on the well in accordance	e with RULE 111.
Sr. Regulatory Analyst (Title)				All sections of this form n			
OCT 1 1985				Fill out only Section t, II, I other such change of co		owner, well name and or	number, or transporter,
(Date)			—- °'	Separate Forms C-104 mi		al in multiply completed	wells.
			l II	ocha:atc i olilla 0-104 III	ee, be med to: each per		· · · ·