STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GA Operator Tenneco Oil Company -P.O. Box 3249, Englewood, CO 80155
Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: l Oil Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner _ El Paso Natural Gas Company, P.O. Box 4990, Farmington, NM 87499 II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease SJ 28-7 Unit State, Federal or Fee USA 228 | Basin Dakota SF 078569 Feet From The ___South Feet From The West Township 27N Range NMPM, Rio Arriba III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) Conoco Inc. Surface Transportation.

Name of Authorized Transporter of Casingnead Gas ... or Dry Gas ... Address (Give address to which approved copy of Inistituting to be sent) El Paso Natural Gas Company

NOTE: Complete Parts IV and V on reverse side if necessary.

	VI. CERTIFICATE OF COMPLIA	NCE
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If well produces oil or liquids, give location of tanks.

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.

If this production is commingled with that from any other lease or pool, give commingling order number

Sr. Regulatory Analyst

(Date)

APPRO	, 19
BY _	Track I lave
TITLE	SUPERVISOR DISTRICT 雅 3

This form is to be filed in compliance with RULE 1104.

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 walls.

Fill out only Section I, II, III, and VI for changes of owner, well name and or number, or transporter, or other such change of condition.

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

B oas actually connected. Farming ton, NM 87499