STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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	OIL	
TRANSPORTER	GAS	
OPERATOR		
PRORATION 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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1.							
Operator Tenneco Oil Company	P WRMD					DEGELVED	
Address						<u> </u>	
P. O. Box 3249, Englewo	od, CO 80)155				ש	
Reason(s) for filing (Check proper box)				Other (Please explain) SEP 0.6.1985			
New Well Change in T	ransporter of:					•	
Recompletion Oil		Dry 0	Gas			OIL CON. DIV.	
lingan '	ghead Gas		densate		Well Na	ame DIST 3	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				<u> </u>	UIS1, 3	
If change of ownership give name and address of previous owner	Paso Natu	ıral Gas	, P.O.	Box 49	90, Farm:	ington, NM 87499	
II. DESCRIPTION OF WELL AND L							
Lease Name	Well No.	Pool Name, In	-			Kind of Lease USA Lease No. State, Federal or Fee	
Day A LS	8	Blanco-	PC E	E .		SF 078414	
Location							
Unit Letter:	550	Feet From The	e N		Line and	1595 E Feet From The	
Line of Section 8	Township	29N		Range	8W	NMPM, San Juan County	
III. DESIGNATION OF TRANSPORT	ER OF OIL AN	ND NATUR	AL 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			P. O. Box 460, Hobbs, NM 88240				
Name of Authorized Transporter of Casinghead Gas or Dry Gas X			Address (Give address to which approved copy of this form is to be sent)				
El Paso Natural Gas				P. 0	. Rox 499	90, Farmington, NM 87499	
	Unit Sec.	Twp.	Rge.	1	ally connected?	When	
If well produces oil or liquids,	G 8	29N	8W	J	Yes		
give location of tanks.	3 1 6	1 2 3 14	374		162	i	
If this production is commingled with that from any	other lease or pool, gi	ive commingling	order number	r			
NOTE: Complete Parts IV and V or	reverse side i	if necessar	.,				
NOTE. Complete Faits IV and V or	r reverse side i	ii necessar	у.				
VI CEPTIFICATE OF COMPLIANCE	_			н	,	OIL CONCEDVATION DIVISION	
VI. CERTIFICATE OF COMPLIANC		_				DIL CONSERVATION DIVISION SEP. 6 198	
I hereby certify that the rules and regulations of the with and that the information given is true and co				APPRO'	VEO	311, 700 130	
with and that the information given is tibe and co	implete to the best t	of my knowledge	e and belief.	∥ _{BY}	Trank	by James	
				'' -		X	
14 mc//				TITLE		SUPERVISOR DISTRICT # 3	
Sit Makines							
	nture)			11		compliance with RULE 1104.	
Sr. Regulatory Analyst	iure)			11		owable for a newly drilled or deepened well, this form must be accoming deviation tests taken on the well in accordance with RULE 111	
			panied 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.				
SEP (Tiple) 1885			Fill out only Section I. II, III, and VI for changes of owner, well name and or number, or transporter,				
V 54 1				11	uch change of con		
(Date)				Separate Forms C-104 must be filed for each pool in multiply completed wells			