## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECE	IVED	
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SANTA FE		
FILE		_
U.S.G.S.		
LAND OFFICE		
	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

DECLIERT FOR ALLOWARIE

TRANSPORTER GAS		REQUE	EST FOH AN	L ATTOMAR	LE	Ou -	ON DIV.		
PROPATION OFFICE	ALITHODI'	ZATION TO			ID NATUE	RAL GAS	ON Da.		
PRORATION OFFICE	AUTHORI	ZATION TO	INVIOL	ON! OIL A!	TO HATO	Di	ST 2 LIV.		
<u></u>							<del>y., y</del>		
Operator Tenneco Oil Company									
	· · · · · · · · · · · · · · · · · · ·								
P.O. Box 3249, Englet	wood, CO	80155							
Reason(s) for filing (Check proper box)					Other (Please explain)				
New Well Change in Transporter of:    Recompletion   Oil Dry Gas				Effective 12/1/87					
Change in Ownership Casing	head Gas	X Conde	nsate						
If change of ownership give name and address of previous owner									
II. DESCRIPTION OF WELL AND LE	EASE						* USA	SF-078046	
Lease Name	Well No.	Pool Name, Inck	uding Forma	tion		Kind of Lease State, Federal or Fee		Lease No.	
Hughes	2	Basin	DK				FED.	*	
Location									
	2440	Feet From The	Nor	rth	Line and	1770	Feet From TheEast		
Unit Letter							_	ļ	
Une of Section 21	Township	29N		Range 8	M	, NMPM.	San Juan	County	
III. DESIGNATION OF TRANSPORT	ER OF OIL A	ND NATURA	L GAS				form in to be east		
Name of Authorized Transporter of Oil  or Condensate X			Address (Give address to which approved copy of this form is to be sent)						
Conoco			P.O. Box 460, Hobbs, NM 88240 Address (Give address to which approved copy of this form is to be sent)						
Name of Authorized Transporter of Cashiyinean data									
El Paso Natural Gas						U, Farmingto	on, NM 87401		
	Unit Sec.	1	Rge.	is gas actually	connected?	i AAUGU			
If well produces oil or liquids, give location of tanks.	G 2	1 <u>29N</u>	<u>8W</u>	Yes					
If this production is commingled with that from any	other lease or pool, (	give commingling o	order number				· · · · · · · · · · · · · · · · · · ·		
NOTE: Complete Parts IV and V or	1 reverse side	if necessary	•						
	.=			11		OIL CONSERVAT	ION DIVISION		
VI. CERTIFICATE OF COMPLIANCE				APPROVE	`			19	
I hereby certify that the rules and regulations of t with and that the information given is true and o	ne Oil Conservation	Division have bee	n complied	APPROVE		<del>40V 1 6 1987</del>		-,	
with and that the information given is true and c	property to the pass	or my anomicago		BY		<u> </u>			
	_				المسط	.). Thony			
Thurs Danner			TITLE SUPERVISION DISTRICT # 5  This form is to be filed in compliance with RULE 1104.						
Michael D. Gammon (Signature)				If this is a request for allowable for a newly drilled or deepened well, this form must be accom-					
Sr. Administrative Analyst				panied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
Sr. Auministracive Analyse				All sections of this form must be filled out completely for allowable on new and recompleted walls.  Fill out only Section 1, II, III, and VI for changes of owner, well name and or number, or transporter,					
11/13/87				or other such	n change of co	indition.			
(De	nte)			Separate F	Forms C-104 m	sust be filed for each po-	ol in multiply completed w	łlis.	