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

NO. OF COPIES RECE!	YED	
DISTRIBUTION		 Г
SANTA FE		_
FILE	Г	
U.\$.6.S.		
LAND OFFICE		
	OIL	
TRANSPORTER	GAS	Г
OPERATOR		
PROBATION OFFICE		

TENNECO OIL COMPANY

Reason(s) for filling (Check proper box)

P.O. BOX 3249, ENGLEWOOD, COLORADO

Oii

Change in Transporter of:

Casinghead Gas

1650

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Linit

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

Operator

Address

New Well

FLORANCE

Line of Section

CONOCO

Recompletion

Change in Ownership

If change of ownership give name and address of previous owner _

II. DESCRIPTION OF WELL AND LEASE

Name of Authorized Transporter of Oil 🗔 or Condensate 🖫

EL PASO NATURAL GAS

If well produces oil or liquids

give location of tanks.

Name of Authorized Transporter of Casinghead Gas . or Dry Gas 1

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

REQUEST FOR ALLOWABLE AND

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

P.O. BOX 2088 SANTA FE, NEW MEXICO 87501									
REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS									
COLORADO	8015	5			-		d s	\dashv	
COLORADO	0010	<u> </u>		Other (Please ex	plain)			\dashv	
orter of:				Change in Transporter Effective 12-01-87					
Gas	K Cond	ensate		1 21160		- 			
E Well No. Poo	Name, Inc	luding Forms	ition		Kind of Lease		Lease N	<u> </u>	
1	Blanco	-			State, Federal or Fee	FED.	SF+07820	i	
0 _{Fe}	et From The	Sout	:h	Line and	990	Feet From The	West		
wnship 29N		· · · · · · · · · · · · · · · · · · ·	Range	9W	, NMPM,	San Jua	an co	unty	
OF OU AND A	NATI IDA	1 646							
OF OIL AND I	MAIUNA	L GAS	Address (G	ive address to whic	h approved copy of this	form is to be sen	,		
			P.0.	BOX 460,	HOBBS, NM	88240		l	
or Dry Gas			Address (G	ive address to whic	h approved copy of this		"	\neg	
Sec.	Tues	Poe.	P.0.	BOX 4990 sally connected?	, FARMINGTO	N, NM 87	7401		
jsec.	тwp. 29N	9W	Yes	MINY CONTROLLS	t vinen				
			1 162	<u> </u>		, · · · · · · · · · · · · · · · · · · ·			
eese or pool, give co erse side if ne				· · · · · · · · · · · · · · · · · · ·		·			
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Conservation Division	on have bee	m complied	APPRO	VED					
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			BY _	7	50				
			TITLE		1. Chang				
			This for	SUPERV	SION DISTR	LCT # 3			

Part Inc

NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE 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. Michael D. Gammon Sr. Administrative Analyst 11/25/87 (Date)

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.