STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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U.\$.0.5.			
LAND OFFICE			
TRANSPORTER	OIL		
	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



PRORATION OFFICE	AU	I HURIZA	AHON IC	IRANS	PORT OIL AND NATUR	WE GWO	NUV 16	1987	Mile Mile	
Operator							OIL COM	Da.		
Tenneco Oil Company						The Table	<i>U</i> 10 10 10 10 10 10 10 10 10 10 10 10 10			
Address			-1				vial. 3	3		
P.O. Box 3249, Engle	ewood,	CO 80	0155							
Reason(s) for filing (Check proper box)					Other (Please explain)					
New Well Change in	New Well Change in Transporter of:									
Recompletion Oil	Recompletion Dry Gas					Effective 12/1/87				
Change in Ownership Casir	nghead Gas		X Cone	densate						
M change of ownership give name and address of previous owner		· · · · · · · · · · · · · · · · · · ·		<u> </u>						
II. DESCRIPTION OF WELL AND L					-ation	Kind of Lease		Lease	e No	
Leese Name	1	_ 1	D 3 a m a	•		State, Federal or	Fee Fodomal	SF-0802		
Florance	41.	-A	Blanc	o Mes	averde		Federal	37-0802	.40	
Location	1500			_	7	040		<u>-</u>		
Unit Letter:	1530	F	Feet From Th	<u> </u>	Line and	840	Feet From The	<u>-</u>		
Line of Section 21	Townshi	in 2	9N		Range 9W	, NMI	ъм. San Juar	1 ,	County	
Line of Section	1041.5					· · · · · ·				
III. DESIGNATION OF TRANSPOR	TER OF	OIL AND	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				P.O. Box 460, Hobbs, NM 88240						
Name of Authorized Transporter of Casinghead Gas 🗀 or Dry Gas 🗆				Address (Give address to which approved copy of this form is to be sent)						
Sunterra Gas Gather	ing Com	npany			P.O. Box 1899			413		
	Unit	Sec.	Twp.	Rge.	is gas actually connected?	Whe	n			
If well produces oil or liquids, give location of tanks.			i	<u>i</u>						
If this production is commingled with that from an	v other lease i	or pool, give :	comminatina	order numb						
					-					
NOTE: Complete Parts IV and V o	on reverse	side if r	necessar	у.						
					11		ATION DUMOIO	1		
VI. CERTIFICATE OF COMPLIANC					11	JIL CONSERV	'ATION DIVISION 07			
I hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given is true and complete to the best of my knowledge and belief.			APPROVED	AUA TP 18	<u> </u>	, 19				
with and that the information given is true and	complete to t	ine pest of h	is rinamed	ge and Delie	BY	~1	/			
11~		_			D.	.) The				
			TITLE SUPERVISION DISTRICT # 3							
Manage Sansuron				11	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.						
SI AUHITHISCIACIVE AND	itle)				All sections of this form m					
11/9/87					Fill out only Section I, II, II or other such change of cor		s of owner, well name ar	id or number, or tra	ansporter	
(Date)				Separate Forms C-104 mg		pool in multiply comple	ted wells.			
					11					