

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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

Form C-104
Revised 10-01-78
Format 05-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
JUL 20 1987
OIL CON. DIV.
DIST. 3

I. Operator
TENNECO OIL COMPANY

Address
P.O. BOX 3249, ENGLEWOOD, COLORADO 80155

Reasons for filing (Check proper box):
☐ New Well
☐ Recompletion
☐ Change in Ownership
☐ Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☒ Dry Gas
☐ Condensate

Other (Please explain):
THE TRANSPORTER'S NAME CHANGED FROM SOUTHERN UNION TO SUNTERRA

If change of ownership give name and address of previous owner: _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name FLORANCE	Well No. 23	Pool Name, including Formation BLANCO MV	Kind of Lease State Federal or Fee SF-080247	Lease No.
Location Unit Letter A : 990 Feet From The North Line and 790 Feet From The East				
Line of Section 24 Township 29N Range 9W NMPW San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> GIANT REFINING	Address (Give address to which approved copy of this form is to be sent): P.O. B. 256, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> SUNTERRA GAS GATHERING COMPANY	Address (Give address to which approved copy of this form is to be sent): P.O. BOX 1899, BLOOMFIELD, NM 87413
If well produces oil or liquids, give location of tanks: Unit Sec. Twp. Rge.	Is gas actually connected? When

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

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.

Steven Perry
(Signature)
ADMINISTRATIVE SUPERVISOR
(Title)
6/29/87
(Date)

OIL CONSERVATION DIVISION
APPROVED **JUL 20 1987**, 19_____
BY *[Signature]*
TITLE **SUPERVISION DISTRICT # 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 wells:
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