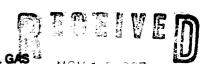
STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE			
	Off		
TRANSPORTER	GAS		
OPERATOR			
PRORATION OFFICE			

OIL CONSERVATION DIVISION P.O. BOX 2006 SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE AND
AUTHORIZATION TO TRANSPORT ON AND NATURAL GAS



1	AUTHOR	ILAIION IO IMM	NOV 1 6 1997		
Operator Tenneco Oil Compa	anv	 	OIL CON. DIV.		
Address			- es : . ?		
P.O. Box 3249, E	nglewood, CO	80155			
Resson(s) for filing (Check proper box)			Other (Rease explain)		
New Well Chair	nge in Transporter of:				
Recompletion	Oil Dry Gas		Effective 12/1/87		
Change in Ownership	Casinghead Gas	Condensate			
If change of ownership give name and address of previous owner	AID I FACE				
II. DESCRIPTION OF WELL A	NU LEASE Well No.	Pool Name, Including For	rmation Kind of Lease Lease No.		
Florance	48	Blanco MV	State, Federal or Fee FED. 82+078385		
Location	1 70	T Branco III			
Δ	. 890	No:	rth Line and 890 Feet From The East		
Unit Letter		Feet From The	Line and USU Feet From The LUSS		
Line of Section 23	Township	30N	Range 8W NMPM San Juan County		
Name of Authorized Transporter of Oil D CONOCO Name of Authorized Transporter of Casing	P.O. Box of Casingheed Gas = or Dry Gas = X		P.O. Box 460, Hobbs, NM 88240 Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent)		
Sunterra Gas Gat			P.O. Box 1899, Bloomfield, NM 87413		
If well produces oil or liquids, give location of tanks.	Unit Sec. A 23	Twp. Rge. 30N 8W			
If this production is commingled with that fi	rom any other lease or pool,	give commingling order numb	br		
NOTE: Complete Parts IV and					
VI. CERTIFICATE OF COMPLIANCE			OIL CONSERVATION DIVISION		
			APPROVED		
with and that the information given is true and complete to the best of my knowledge and belief.			BY BY		
			TITLE SUPERVISION DISTRICT # 3		
Manne Lannien			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.		
	(Title)		All sections of this form must be filled out completely for allowable on new and recompleted waits		
11/13/87			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.		
-	(Date)		Separate Forms C104 must be filed for each pool in multiply completed wells		