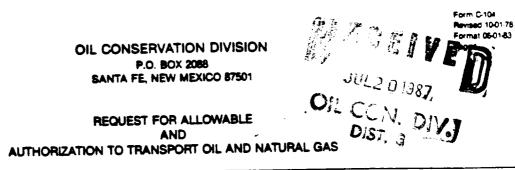
STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

		_	_
	VE0		
DISTRIBUTION			
SANTA PE			
FILE			
U.S.O.S			
LAND OFFICE			
	OIL		
TRANSPORTER	GAB		
OPERATOR			
PROBATION OFFICE			



TENNECO OIL (COMPANY						
Address D. D. D. D. D. 2240	ENCLENO	UD COLODAD	n 80155				
P.O. BOX 3249, ENGLEWOOD, COLORADO 8015				Other (Piesse explain)			
Reason(s) for filting (Check proper box) New Well Change in Transporter of.				THE TRANSPORTER'S NAME CHANGED FROM			
New Well Change in Transporter of Recompletion Dil Dry Gas				SOUTHERN UNION TO SUNTERRA			
	nghead Gas	Condense	ote				
change of ownership give name							
nd address of previous owner							
DESCRIPTION OF WELL AND	LEASE				Kind of Lease		Lasse No
Lesse Name	Well No	Pool Name, Includit			State Federal or Fe		
FLORANCE	38	<u>Bl</u>	LANCO MV	. 		SF-079511A	
Location	1650		South	Line and	990	Feet From The Wes	st
Unit Letter::	1650	Feet From The	JOUICII				
Line of Section 14	Township	30N	Range	8W	. NMPI	 San Juan 	County
GARY ENERGY Name of Authorized Transporter of Casinghaed SUNTERRA GAS GATHERIN	Gas Tor Dry Gas &		P.	BSS (GME BOOVESS TO	which approved copy of the 199, BLOOMFIE	, Englewood, (his form is to be sent. LD, NM 8741	
If well produces oil or liquids. give location of tanks	_i						
If this production is commingled with that from a	ny other lease or pool,	gwe commingling ordi	er number			,	
NOTE: Complete Parts IV and V	on reverse side	if necessary.					
VI. CERTIFICATE OF COMPLIAN	CE			PROVED	OILGONEERY	TIGN DIVISION	, 19
I hereby certify that the rules and regulations of with and that the information given is true and	of the Oil Conservation of complete to the bed	t of my knowledge st		7	ک دیا		
Stewa Dec	w			This form is to be fi	PERVISION DI	ULE 1104	
ADMINISTRATIVE SUP	eneture) ERVISOR		pa	nied by a tabulation	of the deviation lests tak	grilled or despends well this ign on the well in accordance	E WITH MULE 111
	(TRIO)		\{\}	Fill out only Section	I. II. III. and VI for changes	pletely for allowable on new s of owner, well name and or	number, or transporte
D/29/0/			∥ °	or other such change of condition Separate Forms C-104 must be filed for each pool in multiply completed wells			