STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	ED		
DISTRIBUTION			_
BANTA FE			
FILE		Ш	_
U.S.O.S			_
LAND OFFICE			_
TRANSPORTER	OIL		L
	BAB		
OPERATOR			
PRORATION OFFICE			

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

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

REQUEST FOR ALLOWABLE

OIL SULZO 1087

ERATOR SAS			IND PORT OIL AND NATU	RAL GOS		
DRATION OFFICE	AUTHOR	ZATION TO TRAIN			Aller of the second	
TENNECO OIL	COMPANY					
		OD, COLORADO 8	30155			
eson(s) for filing (Check proper box)	E49, ENGELING		Childs in whee a			
New Well Chang	e in Transporter of: Dil	Dry Gas	THE THE SOUTHE	THE TRANSPORTER'S NAME CHANGED FROM SOUTHERN UNION TO SUNTERRA		
	Casinghead Gas	Condensate				
and a second property of the Contract of the C						
change of ownership give name d address of previous owner						
DESCRIPTION OF WELL AN	ID LEASE			Kind of Lasse		SF-
DESCRIPTION OF WELL !!	Well No	Pool Name, Including Fo		State: Federal or Fe	► FD	078580-
Moore	11	Blanco M	<u>V</u>			
position			South Lineard_	1650	Feet From The	<u>West</u>
Unit Letter N :	990	Feet From The			. San Juan	6
	Township	30N	Range 8W	NMPI	y San Juan	Coun
Line or saction						
II. DESIGNATION OF TRANS	PORTER OF OIL	AND NATURAL GAS	Address (Give address to v	mich approved copy of t	his form is to be sent.	
Name of Authorized Transporter of Oil	or Condensate =		Į.			
Name of Authorized Transporter of Cearing	ened Gas - or Dry Ga	<u> </u>	Address (Give address to	which approved copy of t	This form is to be sent.	113
SUNTERRA GAS GATHE	RING COMPANY		P.O. BOX 189			
SUNTERIOR GAS GATTLE	Unit Se	Twp. Rge	is gas actually connected	When	المحسد حضية فقمه فافه	•
If well produces oil or liquids, give location of tanks		i		i		
If this production is commingled with that f		and a commonstated artist for				

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLI	ANCE
---------------------------	------

I hereby certify that the rules and regulations of the Oil Conservation Division have been o with and that the information given is true and complete to the best of my knowledge and belief

ADMINISTRATIVE SUPERVISOR (THIO)

> 6/29/87 (Dete)

APPROVED BY

SUPERVISION DISTRICT TITLE

rable for a newly drilled or deepened well, this form must be accomlation 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 wall: Fill out only Section I, II, III, and VI for changes of owner, well name and or number, or transporte or other such change of condition

Separate Forms C-104 must be filed for each pool in multiply completed wells