STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

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U.S.G.S.			
LAND OFFICE			
	OIL		
TRANSPORTER	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

TRANSPORTER	GAS GAS		REQUEST FOR ALLOWABLE AND		3	10 1110			
PRORATION OFFICE		ALITHODI	ים ZATION TO TRANSF		AND NATHE	RAL GAS	11.74.X	at the receipt	
1		AUTHOR	ZATION TO THANGE	OIII OIL	1110 1111101	,, (E G), (O	Oil C		V
Operator					-		f3	ST. 3	
Ter	neco Oil	Company						ાહી. હે ————————————————————————————————————	
Address	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	- 44mpx. Q							
P.0). Box 32	49 Englewood	. CO_80155					·-	
Reason(s) for filing (Check proper box)				Other (Please ex					
New Well Change in Transporter of:				Transporter of Datota Formation gas chang					
Recompletion	Recompletion Oil Dry Gas				from Northwest Pipeline to Sunterra Gas				
Change in Owners	ship	Casinghead Gas	Condensate	Gathering.					
If change of ownership and address of previous									
II. DESCRIPTION	OF WELL A	ND LEASE							
Lease Name		Well No.	Pool Name, Including Forma			Kind of Leas State, Feder	al or Fee		Lease No.
Florance			Basin Dakota			<u> </u>	Fed	eral	\$F-081098- <i>I</i>
Location									
Unit LetterH	<u> </u>	:1650	Feet From The NOr	th	_ Line and	790	Feet Fro	m The <u>ea</u>	st
Line of Section 3	}	Township	30N	Range C	9₩		NMPM. S	an Juan	County
III. DESIGNATION Name of Authorized Tra		SPORTER OF OIL Af	ND NATURAL GAS	Address (Give	e address to whic	h approved co	py of this form is	to be sent;	
Name of Authorized Tra	insporter of Casino	head Gas or Dry Gas		Address (Give	e address to which	h approved co	py of this form is	to be sent)	
Sunterra G		•		Box 1899 Bloomfield, NM 87913					
Suiterra G	ias da che	Unit Sec.	Twp. Rge.		ly connected?	i i Ciu	When		
If well produces oil or lie	quids,			yes					
give location of tanks.									
If this production is comm	mingled with that f	rom any other lease or pool. g	ive commingling order number	F D110 300	<u>'</u>				
NOTE: Complete	Parts IV and	d V on reverse side	if necessary.						
VI. CERTIFICATE						OIL CONS	ERVATION [DIVISION	1,1988
I hereby certify that the	rules and regulati	ons of the Oil Conservation	Division have been complied	APPROV	ED	<u>`</u>			• ,¬9
with and that the inform	nation given is tru	ie and complete to the best	of thy knowledge and belief.	BY		•	De Principa	2. San	4/
(S			TITLE		ZW	ERVISOR DIST	RICT % 3	0
	Tres	1. 100		- [[n is to be filed in	compliance v	oith RULF 1104		
Suu	100	(Signature)		· 11				epened well, this	form must be accom-
Sr. Admini	strative			panied by a	tabulation of th	e deviation te	sts taken on the v	well in accordance	e with RULE 111. and recompleted walls.
3/15/88				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					

or other such change of condition.

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