STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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	GAS	
OPERATOR		\perp
PRORATION OFFICE		1

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GA

PROPATION OFFICE AUTHORIZATION TO TRANSPOR	IT OIL AND NATURAL GAS
Operator Odd Company	
Tenneco Oil Company	OCT UZ
P. O. Box 3249, Englewood, CO 80155	
Reason(s) for filing (Check proper box)	Other (Please explain)
Character of	Dio
New Well Change in Transporter 51. Recompletion Oil Dry Gas	
X Change in Ownership Casinghead Gas X Condensate	
	o Poy 4990 Farmington, NM 87499
if change of ownership give name El Paso Natural Gas, P.	O. Box 4990, Farmington, NM 87499
II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation	Kind of Lease No.
Lease Name	CTATE D1112221
Sail Oddit SE 5	uc .
Location M - 1137 Feet From The South	Line and 1180 Feet From The West
Unit Letter H : : 113/ Feet From The SUULT	!
Line of Section 2 Township 31N Ri	ange 10W , NMPM, San Juan county
OF OU AND MATURAL GAS	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate A	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Oil 3 Constant	P. O. Box 460, Hobbs, NM 88240
Conoco Inc. Surface Transporter Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this
Name of Authorized Transporter of Co.C.	P. O. Box 4990, Farmington, NM 87499 Is gas actually connected? When
El Paso Natural Gas	is gas actually connected? When
If well produces oil or liquids, give location of tanks. M 2 31N 10W	Yes
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.	
NOTE: Complete Faits is and a service	OIL CONSERVATION DIVISION
VI. CERTIFICATE OF COMPLIANCE	00T 0100F 19
to and constitutions of the Oil Conservation Division have been complied	APPROVED, 's,
I hereby certify that the rules and regulations of the best of my knowledge and belief, with and that the information given is true and complete to the best of my knowledge and belief.	BY San Della Company
Λ	SUZZALOVA
At MICI	TITLE
Mall (1) > Kmuy	This form is to be filed in compliance with RULE 1104.
(Signature)	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.
Senior Regulatory Analyst	All positions of this form must be filled out completely for allowable on new and recompleted wait
(Trie)	Fill out only Section I, II, III, and VI for changes of owner, well name and or number, or transporte
OCT 1 1985	or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.
(Date)	Separate Forms C-104 must be filed for each poor in midniply complete.