


NUMBER OF COPIES RECEIVED DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			FORM C-110 (Rev. 7-60)	
SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS PRODUCTION OFFICE OPERATOR		FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE				
Company or Operator El Paso Natural Gas Company				Lease San Juan 28-7 Unit		Well No. 20
Unit Letter M	Section 8	Township 28-N	Range 7-W	County Rio Arriba		
Pool Blanco Mesa Verde				Kind of Lease (State, Fed, Fee) Federal		
If well produces oil or condensate give location of tanks		Unit Letter Same	Section	Township	Range	
Authorized transporter of oil <input type="checkbox"/> or condensate <input checked="" type="checkbox"/>			Address (give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Company			Box 990, Farmington, New Mexico			
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>						
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input checked="" type="checkbox"/>		Date Connected 12-23-55	Address (give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Company			Box 990, Farmington, New Mexico			
If gas is not being sold, give reasons and also explain its present disposition:						
REASON(S) FOR FILING (please check proper box)						
New Well <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Change in Transporter (check one) Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casing head gas . <input type="checkbox"/> Condensate.. <input checked="" type="checkbox"/>						
Remarks						
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with. Executed this the <u>1st</u> day of <u>January</u> , 19 <u>63</u> .						
OIL CONSERVATION COMMISSION			By 			
Approved by Original Signed By A. R. KENDRICK			Title Petroleum Engineer			
Title PETROLEUM ENGINEER DIST. NO. 3			Company El Paso Natural Gas Company			
Date APR 17 1963			Address Box 990, Farmington, New Mexico			



STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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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

RECEIVED
OCT 02 1985
OIL CON. DIV.
DIST. 3

Operator <u>Tenneco Oil Company -</u>	
Address <u>P.O. Box 3249, Englewood, CO 80155</u>	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> Condensate

If change of ownership give name and address of previous owner El Paso Natural Gas Company, P.O. Box 4990, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>SJ 28-7 Unit</u>	Well No. <u>20</u>	Pool Name, including Formation <u>Blanco-MV</u>	Kind of Lease State, Federal or Fee <u>USA</u> <u>SF</u>	Lease No. <u>078417</u>
Location				
Unit Letter <u>M</u> : <u>925</u> Feet From The <u>South</u> Line and <u>875</u> Feet From The <u>West</u>				
Line of Section <u>8</u> Township <u>28N</u> Range <u>7W</u> , NMPM, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Conoco Inc. Surface Transportation</u>	<u>P.O. Box 460 Hobbs NM 88240</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas Company</u>	<u>P.O. Box 4990, Farmington, NM 87499</u>
If well produces oil or liquids, give location of tanks. Unit <u>M</u> Sec. <u>8</u> Twp. <u>28N</u> Rge. <u>7W</u>	Is gas actually connected? <u>Yes</u>

If this production is commingling with that from any other lease or pool, give commingling order number _____

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

VI. CERTIFICATE OF COMPLIANCE

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

Scott McHenry
(Signature)

Sr. Regulatory Analyst

(Title)

OCT 1 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED Frank J. Davis
BY Supervisor District 3
TITLE _____

This form is to be filed in compliance with RULE 1104.

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.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

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.

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