STATE OF NEW MEXICO **ENERGY AND MINERALS DEPARTMENT**

NO. OF COPIES RECE	IVED	
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SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
	OIL	
TRANSPORTER	OIL GAS	
OPERATOR		
PRORATION OFFICE		

OIL CONSERVATION DIVISION P.O. BOX 2088

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND

NOV 1 6 1987

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

PRORATION OFFICE	AUTHO	ORIZA	ATION TO	TRANSF	PORT OIL AND NATU	IRAL GAS L CON		
Operator Tenneco Oil Company				DIST, @				
Address P.O. Box 3249, Engle) 8	80155					
Reason(s) for filling (Check proper box)					Other (Please explain)			
					, , , , , , , , , , , , , , , , , , , ,			
New Well Change in Transporter of: Gradient Change in Transporter of: Dry Gas Change in Transporter of: Change in Transporter of: Dry Gas Change in Transporter of: Change in Transporter of: Dry Gas Change in Transporter of: Change in Transporter of: Dry Gas Change in Transporter of: Dry Gas Change in Transporter of: Change in Tra				Effective 12/1/87				
	ghead Gas		Conde	msate	<u> </u>			
If change of ownership give name and address of previous owner								
II. DESCRIPTION OF WELL AND L	EASE Well No		Pool Nome Inc	luding Form	ntion	Kind of Lease	Lease No.	
Riddle Com A	1	Blanco Mesaver				State, Federal or Fee Federal	SF-078354A	
Location Unit Letter :	810		Feet From The	Nort	CLine and	1090 Feet From The	East	
Line of Section 9	Township	2	.7N		Range 9W	_{. NMPM.} San Jua	in _{County}	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Or Condensate Conoco Address (Give address to which approved copy of this P.O. Box 460, Hobbs, NM						O, Hobbs, NM 88240		
Name of Authorized Transporter of Casinghead Gas or Dry Gas					Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas	Unit Se	xc.	Twp.	Rge.	P.O. Box 49 st Is gas actually connected?	90, Farmington, NM 8	37401	
If well produces oil or liquids, give location of tanks.	A	9	27N	9W	Yes ,	1		
If this production is commingled with that from any	y other lease or po	ool, give	commingling o	order number		<u> </u>		
NOTE: Complete Parts IV and V o	n reverse si	de if	necessary	<u>.</u>	•			
VI. CERTIFICATE OF COMPLIANCE					OIL CONSERVATION DIVISION			
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.			NOV 16 1987 , 19					
1/\			BY Zu Cham					
Micano Dispured			TITLE SUPERVISION DISTRICT # 3					
Michael D. Gammon (Signature)				If this is a request for allowable for a newly drilled or deepened well, this form must be accom-				
Sr. Administrative Analyst				panied 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 walls.				
11/9/87				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.				