STATE OF NE								j	Form C-104	
NO. OF COPIES RECEIVE	D							17 11 1	Revised 10-01-78 Format 06-01-83	
DISTRIBUTION			RVATION D	IVISION	L)	$H = H^{\prime}$	Page 1			
SANTA FE				P.O	. BOX 2068			Marie Barrell Ma	2	
FILE				SANTA FE, I	NEW MEXICO	87501		.5~ .6	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
U.S.O.B.		Ш							- P. W	
LAND OFFICE	OIL							1 ~ ⁰³ /0-	***	
TRANSPORTER L	RANSPORTER GAS			P.O. BOX 2068 SANTA FE, NEW MEXICO 87501 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
CPERATOR	-	\vdash			AND			District Services	4	
FRORATION OFFICE	FRORATION OFFICE			AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
1		•	AUTHOR	EATION TO THAT	TOI OILI OIL	AND NA	oi we and	مِنْ اللهِ	,	
Operator										
Tenneco 0	il Co	отр	any							
Address	040		-1	00155						
P 0 Box 3249, Englewood, Co. 80155 Reason(s) for filing (Check proper box)						Other (Please explain)				
						To correct previous C-104 filed in				
77						error. (dated 6/29/87)				
. ☐ Recompletion ☐ ☐ ☐ Dry Gas						error	· (date	u b/29/8/)		
L_ Change in Ownership)	<u>Ц</u>	Casinghead Gas	Condensate						
	A MEL	LA	ND LEASE Well No. 6E	Pool Name, Including Fo			Kind of Lea State, Fede		Lease No. SF-07708	
Unit Letter		:	990	Feet From TheNo	orth	Line and	930	Feet From The	_West	
Line of Section 36			Township	28N	Range	10W		NMPM. San Jua	n Count	
III. DESIGNATION C				ND NATURAL GAS						
Name of Authorized Transporter of Oil C or Condensate						Address (Give address to which approved copy of this form is to be sent)				
Conoco, Inc.						P O Box 460, Hobbs, NM 88240-0460 Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Casinghead Gas □ or Dry Gas & El Paso Natural Gas Co.						P O Box 4990, Farmington, NM 87499				
21 1 430 11	 	•	Unit Sec.	Twp. Rge.	is gas actu	ally connected?		When		
If well produces oil or liquid give location of tanks.	is, 		D 36		•	/es		 		
If this production is comming	gled with t	hat fr	om any other lease or pool, g	we commingling order num	nber		<u> </u>			
NOTE: Complete Pa	arts IV	and	l V on reverse side i	if necessary.						
VI. CERTIFICATE OF COMPLIANCE						OIL CONSERVATION DIVISION 1007				
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied					ied APPRO	APPROVED SEP U 3 198/19				
with and that the information								Frank.	J. Savey	
Ti H		K	Tools		TITLE			SUPERVISOR DI	STRICT # 3	

Timothy R. Foster (Signature)

Sr. Administrative Analyst

9/1/87

(Title)

(Date)

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

or other such change of condition.

If this is a request for allowable for a newly drilled or deepened well, this form must be accom-

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

Fill out only Section I, II, III, and VI for changes of owner, well name and or number, or transporter,

panied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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