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

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U.S.G.S.		$\vdash$	
LAND OFFICE		1	$\vdash$
TRANSPORTER	OIL		
	GAS		Г
OPERATOR			
PRORATION OFFICE	<u> </u>		

## OIL CONSEI

P.O SANTA FE, NEW MEXICO 87501

## REQUEST FOR ALLOWABLE

	Revised 10-01-78
RVATION DIVISION D. BOX 2088	Format 06-01-83
	Page 1
NEW MEXICO 87501	

Form C-104

OPERATOR	AND	
PRORATION OFFICE AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS	
<u></u>	m regiven	
Operator	U) E W E I V E III	
Tenneco Oil Company -	OCT 02 1985	
P.O. Box 3249, Englewood, CO 80155	001 02 1300	
Reason(s) for filing (Check proper box)	Other (Please explain) OIL CON. DIV.	
New Well Change in Transporter of:	DIST. 3	
Recompletion Uil Dry Gas	DIS1. 3	
Change in Ownership Casinghead Gas Condensate		
If change of ownership give name and address of previous owner El Paso Natural Gas Compan	y, P.O. Box 4990, Farmington, NM 87499	
II. DESCRIPTION OF WELL AND LEASE		
Lease Name Well No. Pool Name, Including Form	ation Kind of Lease No. State, Federal or Fee USA	
SJ 28-7 Unit 32 A So. Blanco-P		
Location		
Unit Letter C : 1120 Feet From TheNor	th Line and 1685 Feet From The Wort	
Line of Section 19 Township 28N	Range 7W , NMPM, Rio Apriha County	
III DECIGNATION OF TRANSPORTED OF OU AND AUTHOR OF	1120	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil   or Condensate	Address (Circulation Live Tourist Circulation Circulat	
į X	Address (Give address to which approved copy of this form is to be sent)	
Conoco Inc. Surface Transportation Name of Authorized Transporter of Casinghead Gas Cor Dry Gas &	Address (Give address & Which Ipplobed copy of Inis 1817 is to be sent)	
) X	Addiess (dive addiess to which approved dopy of (his total is to be sent)	
El Paso Natural Gas Company   ISec.   Twp.   Rge.	is gas actually connected 0, Farmington, NM 87499	
If well produces oil or liquids,	I was actually connected:	
give location of tanks.	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.		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION T U 2 1985	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied	APPROVED	
with and that the information given is true and complete to the best of my knowledge and belief.	£ 1 (()), 10-	
<i>1</i>	BY	
11 220/1/	TITLE SUPERVISOR DISTINCT	
Stott M= Kmy	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 accom-	
Sr. Regulatory Analyst	panied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
(Title) All sections of this form must be filled out completely for allowable on new and re		
OCT 1 1985	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.	
(Date)	Separate Forms C-104 must be filed for each pool in multiply completed wells.	