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

NO. OF COPIES RECEI	VED		
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SANTA FE			
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	GAS	П	
OPERATOR			
PRORATION OFFICE			

## 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 GAS

1.					Mean.			
Operator IVE G F IM P								
Tenneco Oil Company 🖚 🖛 🕇								
Address								
P. O. Box 3249, Englewood	I, CO 80	155			SEP 06 198			
Reason(s) for filing (Check proper box)				Other (Please ex	(plain) OIL CON. D			
New Well Change in Trans	sporter of:				or CON. D	1\1		
Recompletion Oil		Dry G	as		DIST. 3	'V.		
X Change in Ownership Casinghe	ad Gas	X Conde	ensate	Well N	ame 3			
If change of ownership give name and address of previous owner El Paso Natural Gas, P.O. Box 4990, Farmington, NM 87499								
and address of previous owner								
II. DESCRIPTION OF WELL AND LEA	SE					Lease No.		
Lease Name	Well No.	Pool Name. Inc	-		Kind of Lease USA State, Federal or Fee			
Riddle F LS	4	So. Bla	inco-PC	<u> </u>	SF	080112		
Location								
Unit Letter : 100	00	_ Feet From The	N	Line and	1550 Feet From The	, <u>E</u>		
SIN 20101								
Line of Section 29	Township	28N		Range 8W	, NMPM, San Ju	an County		
III. DESIGNATION OF TRANSPORTED	R OF OIL A	ND NATURA	L GAS					
Name of Authorized Transporter of Oil or Conder		1	ddress (Give address to which approved copy of this form is to be sent)					
Conoco Inc. Surface Transportation			P. O. Box 460, Hobbs, NM 88240  Address (Give address to which approved copy of this form is to be sent)					
Hame of Authorized Transporter of Cashingholds Cas 2								
El Paso Natural Gas					90, Farmington, NM	87499		
Ur	nit Sec.	Twp.	Rge.	Is gas actually connected?	When			
If well produces oil or liquids, give location of tanks.	B 29	28N	8W	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 re	everse side	ii riecessary	•					
AN OFFICIAL OF COMPLIANCE				II .	OIL CONSERVATION DIVI	SION		
VI. CERTIFICATE OF COMPLIANCE  1 hereby certify that the rules and regulations of the Oil Conservation Division have been complied.  APPROVED  APP								
thereby certify that the rules and regulations of the c with and that the information given is true and com	plete to the best	of my knowledge	and belief.					
				BY Draw	wey			
1				<u> </u>	0	SUPERVISOR DISTRICT 5/1 3		
TIT				TITLE				
Soft M=Kinning (Signature)			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. Requiatory Analyst								
(Title)			All sections of this form must be filled out completely for allowable on new and recompleted walls.  Fill out only Section 1, II, III, and VI for changes of owner, well name and or number, or transporter.					
SEP 1 1850			or other such change of condition.					
(Date) Separate Forms C-104 must be filed for each pool in multiply completed wells.								
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