STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

OIL CONSERVATION DIVISION P.O. BOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

	Form C-104 Revised 10-01-78 Format 06-01-83 Page 1
OIL CON	ries ils Logy

OPERATOR ANTI-LODIZATION TO TRANSPO				
PRORATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
l				
Tenneco Oil Company	•			
Address				
P.O. Box 3249 Englewood, CO 80155				
Reason(s) for filing (Check proper box)	Other (Please explain)			
New Well Change in Transporter of:				
Recompletion Oil Dry Gas				
Change in Ownership Casinghead Gas Condensate				
Change in Ownership				
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL AND LEASE				
Lease Name Well No. Pool Name, Including Format	tion Kind of Lease Lease No.			
Blanco A 1E Basin Dakota	Kind of Lease State. Federal or Face Federal NM 012201			
Location				
Unit Letter C : 800 Feet From The NO1	rth Line and 1530 Feet From The West			
Line of Section 36 Township 28N	Range 811 NMPM San Juan County			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	Address (Give address to which approved copy of this form is to be sent)			
Name of Authorized Transporter of Oil : or Condensate*				
Conoco, Inc. P.O. Box 460 Hobbs, NM 88240 Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Casimphead Gas _ Group Gas _ TV 70070				
El Paso Natural Gas	P.O. Box 1492 El Paso, TX 79978			
If well produces oil or liquids, give location of tanks.	to gas actually communication			
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				
becable 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.				
// -				
TITLE SUPERVISION DISTRICT #3				
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 m				
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			
(Title) All sections of this form must be filled out completely for allowable of the section of				
3/28/88	or other such change of condition.			
(Date)	Separate Forms C-104 must be filed for each pool in multiply completed wells.			