

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
JUL 20 1987
OIL CON. DIV.
DIST. 3

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

I. Operator **TENNECO OIL COMPANY**
Address **P.O. BOX 3249, ENGLEWOOD, COLORADO 80155**
Reason(s) for filing (Check proper box):
☐ New Well ☐ Change in Transporter of:
☐ Recompletion ☐ Oil ☒ Dry Gas
☐ Change in Ownership ☐ Casinghead Gas ☐ Condensate
Other (Please explain): **THE TRANSPORTER'S NAME CHANGED FROM SOUTHERN UNION TO SUNTERRA**

If change of ownership give name and address of previous owner:

II. DESCRIPTION OF WELL AND LEASE
Lease Name **Olmer A** Well No **5** Pool Name, including Formation **Basin Dakota** Kind of Lease **State, Federal or Fee** Lease No
Location **G** : **1850** Feet From The **North** Line and **1760** Feet From The **East**
Unit Letter **G** : **1850** Feet From The **North** Line and **1760** Feet From The **East**
Line of Section **25** Township **28N** Range **10W** NMPW **San Juan** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Condensate ☒
GIANT REFINING
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒
SUNTERRA GAS GATHERING COMPANY
Address (Give address to which approved copy of this form is to be sent):
P.O. B. 256, Farmington, NM 87499
Address (Give address to which approved copy of this form is to be sent):
P.O. BOX 1899, BLOOMFIELD, NM 87413
Is gas actually connected? ☐ When ☐

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

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.

OIL CONSERVATION DIVISION
JUL 20 1987
APPROVED **Burt J. [Signature]**, 19____
BY **SUPERVISION DISTRICT # 3**
TITLE

This form is to be filed in compliance with RULE 1104
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied 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 well.
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.
Separate Forms C-104 must be filed for each pool in multiply completed wells

Steve [Signature]
(Signature)
ADMINISTRATIVE SUPERVISOR
(Title)
6/29/87
(Date)