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

(Date)

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DISTRIBUTIO	N	Τ
SANTA FE		Т
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	GAS	Ι
OPERATOR		T
PRORATION OFFICE		Т

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



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

**REQUEST FOR ALLOWABLE** 

OPERATOR					עאא		<b>_</b>	GIV. DIV.		
PROPATION OFFICE	AUT	THORIZ	ZATION T	O TRANS	PORT OIL	AND NATU	RAL GAS D	ST. 3		
<u>l</u>									<del></del>	
Operator									ļ	
Tenneco Oil Company										
Address		00	00155							
P.O. Box 3249, Engl	ewood,	CU_	80155			Other (0)				
eason(s) for filling <i>(Check proper box)</i>						Other (Please explain)				
New Well Change in Transporter of:					,	Effective 1/1/87				
☐ Recompletion ☐ Oil ☐ Dry Gas					•	211666146 17 17 67				
Change in Ownership Cas	inghead Gas		LAJ Co	ndensate						
If change of ownership give name									×	
and address of previous owner										
II DESCRIPTION OF WELL AND	LEASE								-	
II. DESCRIPTION OF WELL AND LEASE  Lease Name Well No.   Pool Name, Including Format				nation	Kind of Lease Lease No.					
Florance	41-	Α	Blan	co Mes	averde		State, Federal or Fed	Federal	SF-080246	
Location								_		
Unit Letter : :	1530		_ Feet From T	<sub>he</sub> Sou	<u>th</u>	Line and	1840	Feet From TheEas	<u>st</u>	
Line of Section 27	Townshi	ip	29N		Range	91/	, NMPM	<u>San Juan</u>	County	
							•			
III. DESIGNATION OF TRANSPORT  Name of Authorized Transporter of Oil   or C	TER OF	OIL AN	ID NATUE	RAL GAS	Aridress (G	ive address to whi	ch approved copy of thi	s form is to be sent)	· · · · · · · · · · · · · · · · · · ·	
							De Ventura	, Ste. 100		
Petro Source Corpor Name of Authorized Transporter of Casinghead		v Gee 🗆			SCOT1		AZ 85258 ch approved copy of thi	s form is to be sent)		
Name of Authorized Hamsporter of Cashighess		, 023			7.23.33.					
J 00-	Unit	Sec.	Twp.	Rge.	is gas actu	ally connected?	When			
If well produces oil or liquids,	j	21	29N	9W		,	Ì			
give location of tanks.		121	1 231	<u> </u>						
If this production is commingled with that from a	ny other lease o	or pool, giv	re comminglin	g order numb	er					
NOTE: Complete Parts IV and V	on reverse	side il	f necessa	rv.						
				•						
VI. CERTIFICATE OF COMPLIAN	CE				H	(	OIL CONSERVA	LION DIAIRÍON	10 0 100C	
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.			r.	Sa I I San I						
					BY _		<i></i>	m/3//	Δ	
$\sim$ $\sim$				TITLE	TITLE SUPERVISOR DISTRIC 明 5					
tenedur				- []	This form is to be filed in compliance with RULE 1104.					
Steve Durio (Signature)					-	If this is a request for allowable for a newly drilled or deepened well, this form must be accom-				
Administrative Supervisor					11 '	panied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.				
(Title)					- 18	All sections of this form must be filled out completely for allowable on new and recompleted walls.				
December 1, 1986						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.				
					11	-				