STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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U.S.O.S.		1_
LAND OFFICE		┸
TRANSPORTER	OIL	丄
	GAS	
OPERATOR		1_
PRORATION OFFIC	2	

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

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS OIL CON. DIV.
DIST. 3

Operator OTI COMPANY		
TENNECO OIL COMPANY		
P.O. BOX 3249, ENGLEWOOD, COLORAD	0 80155	Other (Piease explain)
Respon(s) for filling (Check proper box)		Change in Transporter
New Well Change in Transporter of:		Effective 12-01-87
Recompletion Oil U		Effective 12-01-07
Change in Ownership Casinghead Gas A Condense	B16	
If change of ownership give name and address of previous owner		
II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Include	ing Formation	Kind of Lease State, Federal or Fee
24 172000	MV	Federal SF+078580A
Moore 3A 1 Branco		
I 1845 Feet From The	S	Line and 925 Feet From The E
Unit Letter Peet Promitive		
4 Township 30N	Range	81/ NMPM San Juan county
Line of Section 4 Township 3011		-
Name of Authorized Transporter of Oil or Condensate CONOCO Name of Authorized Transporter of Casinghead Gas or Dry Gas SUNTERRA GAS GATHERING If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other issaes or pool, give commingling ord	P . O . Rge. Is gas ac	BOX 460 HOBBS, NM 88240 s (Give address to which approved copy of this form is to be sent) BOX 1899 BLOOMFIELD, NM87413 actually connected?
NOTE: Complete Parts IV and V on reverse side if necessary. OIL CONSERVATION BIYISION		
I hereby certify that the rules and regulations of the Dil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.		3 W. Charl
	TITLE	
Milassyron.	This	is form is to be filed in compliance with PULE 1104.
		this is a request for allowable for a newly drilled or deepened well, this form must be accorded by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
Senior Administrative Analyst		ed by a tabulation of the deviation tests taken by the war in accompanies on new and recompleted walls I sections of this form must be filled out completely for allowable on new and recompleted walls
(ine)	Fill or other	il out only Section I, II, III, and VI for changes of owner, wall name and or number, or transporte ther such change of condition.
November 25, 1987	Sep	sparate Forms C-104 must be filed for each pool in multiply completed wells.