STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RE	CEIVED	
DISTRIBUTIO	N	\top
SANTA FE		П.
FILE		
U.S.G.S.		
LAND OFFICE		\perp
TRANSPORTER	OIL	
	GAS	\Box
OPERATOR		
PROBATION OFFICE	E	

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

AUG 0 8 1986
OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE

OPERATOR			AND		V			
PRORATION OFFICE	AUTHORI	ZATION TO TRAN	SPORT OIL	AND NATUR	AL GAS			
<u> </u>				 				
Operator Od 1 Co								
Tenneco Oil Co.								
	nglewood, CO	80155						
Reason(s) for filing (Check proper box)				Other (Please explain)				
_ ``	Change in Transporter of:							
Recompletion	Oil		Comingle-Order #DHC-527					
Change in Ownership	Casinghead Gas	Condensate						
If change of ownership give name and address of previous owner		·						
and addisss of provides owner.								
II. DESCRIPTION OF WELL A	ND LEASE	Pool Name, Including Fo			Kind of Lease	 	Lease No.	
Lease Name	Well No.			יר	State, Federal or Fee	USA SF	078385	
Florance	39	Blanco MV	/ Dasiii L		<u> </u>			
Location	. 990	N.	orth	. 16	50	Feet From The Eas	t	
Unit Cetter B		Feet From The	<u> </u>	Line and		restriction the		
the of Senting 35	Township 3	ON	Range	8W	, NMPM,	San Juan	County	
Line of Section 33	Township		*					
III. DESIGNATION OF TRANS	PORTER OF OIL A	ND NATURAL GAS	3					
Name of Authorized Transporter of Oil	or Condensate □X		Address (h approved copy of this		12_5116	
			115	115 Inverness Dr., Englewood, CO 80112-5116 Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Casinghead Gas □ or Dry Gas □								
Southern Union Gathering Corp.			P. U	P. O. Box 3981, Bloomfield, NM 87413				
If well produces oil or liquids,	Unit Sec.	Twp. Rge.		idany compoted.				
give location of tanks.		1 - 1						
If this production is commingled with that f	rom any other lease or pool, o	give commingling order num	nber					
NOTE: Complete Parts IV and	d V on reverse side	if necessary.						
						TO STORE OF THE ST	1000	
VI. CERTIFICATE OF COMPL					DIL CONSERVAT	LION DIMINITION OF	ւ ,1986	
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.			lied APPR	OVED		170	+, '8 <u></u>	
with and that the information given is tru	ie and complete to the best	Of the knowledge and on	BY					
			SUPERVISOR DISTRICT 3					
V-t m	$\exists /$		TITLE					
Sion (11)	Kiny		This	form is to be filed in	compliance with RULI	E 1104.		
	(Signature)		If this	s is a request for all	owable for a newly dri ne deviation tests taken	lied or deepened well, this on the well in accordance	i form must be accome with RULE 111.	
Sr. Regulatory Analyst			— All se	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				
(100)			Fill o	Fill out only Section I, II, III, and VI for changes of owner, well name and or number, or transported				
August 6, 1986	(Date)			r such change of co		ol in multiply completed:	wells.	
	(D810)		Sepa	rate Forms C-104 m	ust be thed for each po	ool in multiply completed		