

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.O.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	

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

Form C-104
Revised 10-01-78
Format 06-01-83
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JUL 20 1987

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

Operator TENNECO OIL COMPANY	
Address P.O. BOX 3249, ENGLEWOOD, COLORADO 80155	
Reasons for filing (Check proper box): ☐ New Well ☐ Recompletion ☐ Change in Ownership	Change in Transporter of: ☐ Oil ☐ Casinghead Gas ☒ Dry 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 FLORANCE	Well No. 10	Pool Name, including Formation BLANCO MV	Kind of Lease State Federal or Fee SF-076934	Lease No.
Location Unit Letter H : 1650 Feet From The North Line and 990 Feet From The East Line of Section 30 Township 30N Range 9W NMPM San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Petro Source	Address (Give address to which approved copy of this form is to be sent) 8777 E. Via De Ventura, Ste. 100 Scottsdale, AZ 85258
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. BOX 1899, BLOOMFIELD, NM 87413
If well produces oil or liquids, give location of tanks	Unit Sec Twp Rge 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.

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

OIL CONSERVATION DIVISION

APPROVED **JUL 20 1987**, 19____
BY *[Signature]*
TITLE **SUPERVISION DISTRICT # 3**
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 wells:
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