STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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	VED		
DISTRIBUTION			
BANTA PE			
PILE		Ţ	
U.S.O.S.			L
LAND OFFICE			
	OIL		
TRANSPORTER	BAS		L
OPERATOR			L
PRORATION OFFICE			
		E	E

OIL CONSERVATION DIVISION P.O. BOX 2068 SANTA FE, NEW MEXICO 87501

Format 06-01-83 NOV 3 0 1987.

Form C-104 **Revised 1001-78**

DECLIEST FOR ALLOWARLE

RANSPORTER BAS NEGUEST FOR	0/987		
PERATOR ALTERIORIZATION TO TRANSPO	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
AUTHORIZATION TO TRANSPO	Down Draw		
TENNECO OIL COMPANY			
P.O. BOX 3249, ENGLEWOOD, COLORADO 80	0155		
Nesson(s) for filing (Check proper box)	Other (Please explain) Change in Transporter		
New Well Change in Transporter of:			
Recompletion Oil Dry Gas	Effective 12-01-87		
Change in Ownership Casinghead Gas A Condensate			
change of ownership give name address of previous owner			
I. DESCRIPTION OF WELL AND LEASE Well No. Fool Name, including Formation	on Kind of Lease Lacae No.		
Lasse Name	State, Federal or Fee SF -078116		
Florance 2 Blanco MV	51, 10751.15		
Location	h Feet From The East		
Unit Latter A 990 Feet From The Nort	Ti Line and Foot Foot Foot Foot Foot Foot Fo		
Line of Section 20 Township 30N	Range 9W , NMPM, San Juan county		
Name of Authorized Transporter of Oil or Condensate CONOCO	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 460 HOBBS, NM 88240 Address (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Casinghead Gas or Dry Gas			
SUNTERRA GAS GATHERING	P.O. BOX 1899 BLOOMFIELD, NM 87413		
M scali produces oil or liquids, A 20 20NI QIJ	Yes		
give location of tarits.			
*H 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	PROVED, 19, 19		
evith and that the information given is true and compare to the second s			
TITLE SUPERVISION DISTRICT #5			
This form is to be filed in compliance with PULE 1104.			
Configuration (Separation)	at an in the account for altowable for a newly drilled or despend well, this form must be accom-		
Min Chiap III a min of the deviation of the deviation tests taken on the well in accordance with RULI			
Senior Administrative Analyst All sections of this form must be filled out completely for allowable on new and recompletely for allowable on new and recompletely for allowable on new and or number or transfer on the filled out completely for allowable on new and or number or transfer or trans			
• •	Fill out only Section I, N, NI, and VI for changes of owner, well name and or number, or transporter, or other such change of condition.		
November 25, 1987	Consider Source C-104 must be filled for each pool in multiply completed wells.		