ERNIE, AS PER ALICE'S
Request.

Bab Sagle
Tenneco Oil

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

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PRORATION OFFICE	

OIL CONSERVATION DIVISION

P.O. BOX 2088 SANTA FE, NEW MEXICO 87501

JAN

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

· · ·	Format 06-01-83 Page 1
Be ul cara	
	DIV.
Commingle	

Form C-104

Revisec 10-01-78

P. O. Box 3249,	Englewood	d . C O 801	.55					
Reason(s) for filing (Check proper box)	<u> </u>			Other (Please 6	explain)			
New Well Change in Fransporter of: Recompletion Jil Dry Gas Change in Ownership Casinghead Gas Condensate			Commingle					
change of ownership give name address of previous owner	EASE					TIE A		
change of ownership give name address of previous owner. DESCRIPTION OF WELL AND LE sase Name Florance		Pool Name Inclu	iding Formation MV/Basin DK		Kind of Lease State, Federal or Fee	USA SF		Lease No. 080123
change of ownership give name address of previous owner. DESCRIPTION OF WELL AND LE	EASE Well No. 5	Blanco	=		State, Federal or Fee	SF	East	

Name of Authorized Transporter of Oil or Condensate X				Address (Give address to which approved copy of this form is to be sent;				
Gary Energy Corporation				4 Inverness Cou	urt East, Englew	100d, CO	80112-5 5 9	
Name of Authorized Transporter of Casing	head Gas 🗌 or I	Dry Gas 🛝			Address (Give address to which ap	pproved copy of this form is to be	sent)	
Southern Union Ga	theri <mark>ng C</mark>	ompany	/		P. O. Box 3981,	, Bloomfield, NM	874 13	
	Unit	Sec.	Twp.	Rge	Is gas actually connected?	When		
If well produces oil or liquids, give location of tanks.	Α	22	30N	9W	Yes			

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.
Stock McKing
(Signature)
Senior Regulatory Analyst
(Title)
1/6/86
(Date)

APPROVED	OIL CONSERVATION DIVISION 8 1986
BY	Dranks Lave
TITLE	SUPERVISOR D O HOT # 3
	iled in compliance with RULE 1104.

If this is a request for allowable for a newly druled 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 walls.

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.