STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES REC	EIVED	
DISTRIBUTIO	N	
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
	OIL	Т
TRANSPORTER	GA5	Т
OPERATOR		1
PRORATION OFFICE	E	T

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE

GAS	5		ח	EGUESTI	ON ALLO	IADEL				
OPERATOR					AND					
PRORATION OFFICE		AUTH	ORIZATION	TO TRAN	ISPORT OI	L AND NATU	RAL GAS		(1 10 20 3	and the same
Operator										1221
Tenneco (il Co	mpany								i in the
Address								F7 £3	CT 02 1385	1
P O Rox	3249	, Englewood	. CO 80	155						•••
Reason(s) for filing (Check pr	oper box)	, <u> </u>	-,			Other (Please e	xplain)	Oil	CON. W	182
New Well	Char	ge in Transporter of:						• • • • • • • • • • • • • • • • • • •	DIST. 3	
Recompletion		Oil		Dry Gas						
Change in Ownership	\Box	Casinghead Gas	\square	Condensate						
LA Change in Currenting										
If change of ownership give na	ame	El Paco	Natural	Gas	D O B	ox 4990.	Farming	ton. NN	4 87499	
and address of previous own-	er	El rasu	Natural	uas,	Ta Va D	UA TJJU	, princing	<u> </u>		
		ND LEAGE								
II. DESCRIPTION OF	WELL A	ND LEASE Well N	lo Pool Nar	ne, Including F	ormation		Kind of Leas	e	USA	Lease No.
Lease Name				_			State, Federa	al or Fee	SF	080133
San Juan	<u> 32-9</u>	<u>Unit 46</u>	<u> B1a</u>	inco Me	<u>saverde</u>				<u> </u>	1.000133
Location						_			,-	,
Unit LetterG		1500	Feet Fro	m The	North	Line and	500	Fee	From The Ea.S.	τ
									C	
Line of Section 4		Township	31	\	Range		W	NMPM,	<u>San Juan</u>	County
III. DESIGNATION OF	er of Oil	PORTER OF OI or Condensate \(\forall \) rface Trans			Address	Give address to wh				
Name of Authorized Transport	er of Casino	head Gas D or Dry G	Sas V	<u>///</u>	Address	(Give address to wh	ich approved co	py of this for	n is to be sent)	
					D	0. Box 49	90 Fam	minato	n. NM 8749	9
El Paso N	latura		Sec. Twp	Rge.		tually connected?	/ <u>// 1 411</u>	When	113 1411 07 13	
If well produces oil or liquids,					Voc		į			
give location of tanks.				<u>1N i 9</u> W)	l		· · · · · · · · · · · · · · · · · · ·	
If this production is commingle	d with that f	rom any other lease or p	oool, give commi	ngling order nu	ımber				7.4	
NOTE: Complete Par	ts IV and	d V on reverse s	ide if neces	ssary.						
VI. CERTIFICATE OF	COMPL	IANCE					OIL CONS	ERVATIO	Montelon	
I hereby certify that the rules	and regulati	ons of the Oil Conserv	ation Division h	ave been com		OVED	\geq_{001}	 /~/	1303	_ , 19
with and that the information	ı given is trı	e and complete to the	best of my kno	wledge and b	elief.	ζ	50.	1(4)	/ /	
4					∥ BY		1 thinks		we -	
	/	/ .			TITLE	:	SUPERVISOR	DISTRICT 3	23 ()	
J. XH	- M/	ZV min			ii					
	-100	(Signature)				form is to be filed				form must be accom
0 4- 0	1 - 4	(Signature)	_		If th	is is a request for a by a tabulation of	allowable for a r the deviation te	newly drilled : sts taken on	or deepened well, this the well in accordance	with RULE 111.
Senior Re		ory Analyst	<u> </u>						for allowable on new a	
	0	CT 1 198	5		Fill		, III, and VI for c		ner, well name and or n	
(Date)						Separate Forms C-104 must be filed for each pool in multiply completed wells.				