STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION		Ι
SANTA PE	П	Γ
FILE		
U.8.0.6.	Т	
LAND OFFICE		
TRAMPORTER OIL		
GAS		
OPERATOR		
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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 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PAGNATION OFFICE	A	UTHORIZA	TION TO TRANS	PORT OIL AN	UTAN D	RAL GAS		
UNION OIL COMP	ANY OF CA	LIFORNI	A					
P. 0. BOX 2620	D - CAS	SPER. WY	OMING 82602	-2620			· · · · · · · · · · · · · · · · · · ·	
Roosen(s) for filing (Check prop	er box)		<u> </u>		er (Please	espiain)		
Now Well	ç	¬ ·	ansperter of:	_				
Recompletion Change in Ownership		OII Cestnghe	—	y Gas ondensate				
If change of ownership give n and address of previous owner	EL PA	SO NATU	RAL GAS CO.	- BOX 990	- FAR	MINGTON, NM	87401	
II. DESCRIPTION OF WEL	L AND LEA	SE						
Lease Name			ol Name, including F	ormation		Kind of Lease		Legee No.
Rincon Unit		102	Blanco-Me	saverde		State, Federal or	F•• Fed SF	079160
Location Unit Letter M	990F	Feet Fram Ti	he <u>South</u> Lin	e and99	0	Feet From The	West	
Line of Section 11	Township	26N	Range	7W	, NMPM,			County
III. DESIGNATION OF TR	ANSPORTE	R OF OIL	AND NATURAL	. GAS				
Name of Authorized Transporter			nagte 🔼	Andress (Give	address :	o which approved	copy of this form is	i to be sent)
EL PASO NATURAL				BOX 990 -	- FARM	INGTON, NM	87401	
Name of Authorized Transporter EL PASO NATURAL	GAS CO.			BOX 990 -	- FARM	INGTON, NM		to be sent;
If well produces oil or liquids, give location of tanks.	Unit	Sec. 11	26N 7W	Yes	y cannecie	id? When		
If this production is commingl	ed with that	from any ot	ther lease or pool,	give commingl	ing order	number:		
NOTE: Complete Parts IV	and V on re	verse side	if necessary.	ı i				
VI. CERTIFICATE OF COMPLIANCE				OIL CONSERVATION DIVISION				
I hereby certify that the rules and regulations of the Oil Conservation Division have			APPROVED APR A901986					
been complied with and that the information given is true and complete to the best of						5	2. 1. 1 (H	
my knowledge and belief.	_			BY			SUPERVISOR DIS	TRICT D
Lend 3	P Ka	10						
	· pe					be filed in comp eat for allowable		.E 1104. Li ed or deepense
DISTRICT PRODUCT	(Signature) TION SUPF	RINTEND	FNT	well, this f	orm must		by a tabulation	of the deviation.
	(Title)	MAY	1986			this form must be completed wells.	e (Llied out comp	letely for allow-
	(Date)	E	TO TO	FIII ou	it only S			enges of owner,
	,,	ID) R	W By I I	Separat	e Forms	C-104 must be		•
		ÎN.	APR 0 9 1986	completed w	relia.			

OIL CON. DIV