## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTI	04		
BANTA FE			
FILE			_
U.8.G.4.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			

## 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

I. AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS
UNION OIL COMPANY OF CALIFORNIA	
P. O. BOX 2620 - CASPER, WYOMING 82602-26	20
Reesen(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	
Recompletion OII Do	y Gas
Change in Ownership Casinghead Gas Co	ondens at e
If change of ownership give name Et DASO NATURAL CAS CO.	
end eddress of previous owner EL PASO NATURAL GAS CO.	- BOX 990 - FARMINGTON, NM 87401
II DECOMPTON OF WELL AND IT ACT	
II. DESCRIPTION OF WELL AND LEASE    Well No.   Pool Name, Including F	ormation   Kind of Lease   Fall
	State Federal or See
Rincon Unit 2 Blanco S-PC	Signate, Federal or Fee SF 079302
A 000 N	1000 Foot
Unit Letter A : 990 Feet From The NOTEN Lin	e and 1090 Feet From The East
Line of Section 6 Township 26N Range	6W , NMPM, Rio Arriba . County
	3.20 1.2.2.2.2.
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	, GAS
Name of Authorized Transporter of Oil or Condensate [X]	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
EL PASO NATURAL GAS CO.	BOX 990 - FARMINGTON, NM 87401
If well produces oil or liquids, Unit Sec. Twp. Rgs.	is gas actually connected? When
give location of tanks. A 6 26N 6W	Yes
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.	
	CH CONCEDIATION DU VOICE
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED APRIL 1986
peen complied with and that the information given is true and complete to the best of	5
ny knowledge and belief.	BY
21000	TITLE SUPERVISOR DISPRICT EL S
The d. Meer	
	This form is to be filed in compliance with RULE 1104.
(Signature)	If this is a request for allowable for a newly drilled or deepener well, this form must be accompanied by a tabulation of the deviation
DISTRICT PRODUCTION SUPERINTENDENT .	tests taken on the well in accordance with AULE 111.
(Title)	All sections of this form must be filled out completely for allow able on new and recompleted wells.
MAY 1 1986	Fill out only Sections I. II. III. and VI for changes of owner
OFU E BY F	well name or number, or transporter, or other such change of condition
	Separate Forms C-104 must be filled for each pool in multiply
400 o	completed wells.
APR 0 9 1986	

OIL CON. DIV.