NO. OF COPIES RECEIVED 5	•			
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMM.SSION Form C-104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and			
FILE	. REQUEST F	AND	Effective 1-1-65	
U.S.G.S.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL G	AS	
LAND OFFICE				
TRANSPORTER OIL	· -			
GAS	!			
PRORATION OFFICE				
Operator	i			
El Paso Natural Gas	Company			
Reason(s) for filing (Check proper box))	Other (Please explain)		
New Well	Change in Transporter of:	Change in Transporter ci:		
Recompletion.	Oil Dry Gas	= 14cmic orner@c xx.or		
Change in Ownership	Casinghead Gas Condens	Rincon Unit #150)	
If change of ownership give name and address of previous owner				
DESCRIPTION OF WELL AND	LEASE Well No. Pool Nam	e, Including Formation	Kind of Lease	
Rincon Unit NP	150(MV) BL	anco Mesa Verde	State, Federal or Fee	
Location				
Unit Letter A ;	Feet From TheLine	e and Feet From 1	The	
Line of Section 6 Tox	wnship 26-n Range 6	W , NMPM, Rio A	rriba County	
Line of Section O , Tov	wnship 20-N Range U	, 1500-100,	oom,	
DESIGN/ TION OF TRANSPORT	or Condensate X	Address (Give address to which appro	ved copy of this form is to be sent)	
El Paso Natural Gas	s Company	Address (Give address to which appro	med cany of this form is to be sent)	
Name of Authorized Transporter of Case El Paso Natural Case	Ä.	Address (Give dualess to which appro-	bea copy of this form is to be sent,	
		Is gas actually connected? Wh	en	
If well produces oil or liquids, give location of tanks.		Yes		
give locat on of tanks.	th that from any other lease or pool,	 		
give locat on of tanks.	th that from any other lease or pool,	give commingling order number:	Diug Dack Samo Basty Diff Bast	
give locat on of tanks. If this pro luction is commingled wi COMPLETION DATA	Cil Well Gas Well	 	Plug Back Same Res'v. Diff. Res'	
If this pro luction is commingled wi COMPLE TION DATA Designate Type of Completic	on - (X) Gas Well	give commingling order number:	Plug Back Same Res'v. Diff. Res'	
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Petroleum Engineer

(Date)

October 11, 1965

or Fee County s form is to be sent) s form is to be sent) Same Res'v. Diff. Res'v. g Shoe CKS CEMENT qual to or exceed top allow-MISSION _, 19_ C. Arnold with RULE 1104. newly drilled or deepened abulation of the deviation RULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply