REVISED

All sections of this form must be filled out completely for a

Fill out only Sections I. II. III, and VI for changes of on

war a second

il name or number, or transporter, or other such change of condi-Separate Forms C-104 must be filed for each pool in mul-

able on new and recompleted wells.

completed wells.

STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT Form C-104 ---Revised 10-01-78 DISTAIGUTION Format 06-01-83 BANTA PE P. O. BOX 2088 PILE U.B.G.A SANTA FE, NEW MEXICO 87501 RECUEST FOR ALLOWABLE AND PROBATION OFF AUTHORIZATION TO TRANSPORT OIL AND NATURAL G Operator El Paso Natural Gas Company P. O. Box 4289, Farmington, NM 87499 Ressorts) for tiling (Check proper box) Other (Please expiain) X Now Well OII Recognistics Dry Gas Change in Ownership Condensate If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE Pool Name, including Formation Kind of Lease San Juan 27-5 Unit 139M Blanco Mesa Verde SF 079392 Location Feet From The North Line and 1190 Line of Section 20 Township 27N -Range 5W , NMPM. Rio Arriba Co III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of CII Againss (Give address to which approved copy of this form is to be sent) El Paso Natural Gas Company P. O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent; Name of Authorized Transporter of Casinghead Gas El Paso Natural Gas Company P. O. Box 4289, Farmington, NM 87499 Sec. When Unit Two. Rge. Is gas actually connected? If well produces oil or liquids, give location of tanks. Ε . 20 27N • 5W No 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. OIL CONSERVATION DIVISION VI. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED been complied with and that the information given is true and complete to the best of Original Signed by FRANK T. my knowledge and belief. BY TITLE SUPERVISOR DISTRICT # 3 This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deep (Signalwe) well, this form must be accompanied by a tabulation of the devi tests taken on the well in accordance with RULE 111. Drilling Clerk

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/Dases

2-24-86



STATE OF NEW MEXICO	•			·
ENERGY AND MINERALS DEPARTMENT	OU CONSER	VATION DIVI	SIOND E FEB 26 15 OI: CON. MATURAL GADIST. 3	Form C-104 Revised 10-01-78 Forms: 06-01-83
PILE		BOX 2088	SION ERE	Page 1
W.S.O.J.	SANTA FE, N	EW MEXICO 87	501	4 V.E.
LAMO OFFICE			FED	~ @ \M
TRANSPORTER OIL	DECLIECT	FOR ALLOWABLE	- 261i	900
OPERATOR	•	AND	With Cong.	06
PROBATION OFFICE	AUTHORIZATION TO TRA	NSPORT OIL AND N	ATURAL GASTICE	DA
Operator	_		187. 3	-7 <i>V</i> ,
El Paso Natural Gas Con	npany			i e e
P. O. Box 4289, Farming	gton, NM 87499			
Ressorts for tiling (Check proper box)		Other (P	lease expiain)	
Recompletion	Change in Transporter of:		••	
Change in Ownership	Casinghead Gas	Dry Gas		•
Croude in Columnity	Casindaead Cas	Condensate		***
If change of ownership give name and address of previous owner	· · · · · · · · · · · · · · · · · · ·			
II. DESCRIPTION OF WELL AND LI	EASE Well No. Pool Name, Including	F		
San Juan 27-5 Unit	1		State (Federa) or Fee	CE 070702
Location Location	139M Basin Dakota		Store Council of 7 and	SF 079392
Unit Letter E : 1420	Feet From The North L	1100:	- July	_
. <u>1420</u>	_ real ram the NOTELL C	Time and	Feet From The West	<u> </u>
Line of Section 20 Township	D 27N- Range	5W , NA	APM. Rio Arri	iha Co
T DECLOSION				
Mome of Authorized Transporter of Oil	ER OF OIL AND NATURA	IL GAS		
El Paso Natural Gas Company		Aggress (Give address to which approved copy of this form is to be sent)		
Name at Authorized Transporter at Casingneed Gas ar Dry Gas		P. O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Com	P. O. Box 4289, Farmington, NM 87499			
If well produces oil or liquids, Unit	is gas actually conn	ected? When	M 87499	
give location of tanks.	No			
If this production is commingled with the	t from any other lease or pool,	give commingling or	der number:	
NOTE: Complete Parts IV and V on	reverse side if necessary.		**	
VI. CERTIFICATE OF COMPLIANCE	•	ll oil	CONSERVATION DIV	IISION
•		FFR 2.3 100c.		
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		APPROVED		
my knowledge and belief.	is true and complete to the pest of	BY	Original Signed by FRA	ANK T. CHAVEZ
				RVISOR DISTRICT 指 4
<i>[]</i>		TITLE		asteok bistinet 32 c
\mathcal{N}_{1000}	/ / !	This form is	to be filed in compliance	With BULE 1104.
(Signature)	auring	If this is a re	quest for allowable for a	newly drilled or deen
Drilling Cl	lerk	well, this form mu tests taken on the	st be accompanied by a to well in accordance with	abulation of the devi-
(Title)		All sections of	of this form must be filled	
2-24-86		aple on new and s	ecompleted wells.	•
(Doie)		FIII out only well name or number	Sections I, II, III, and ${}^{\circ}$	VI for changes of owner
	Separate Form	se C-104 must be filed f		
	**	completed wells.		