## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION		T	
SANTA PE			
FILE		1	1
U.1.Q.3.			i
LANG 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

Separate Forms C-104 must be filed for each pool in multip

	R ALLOWABLE
PROMATION OFFICE	ND
AUTHORIZATION TO TRANSI	PORT OIL AND NATURAL GAS
I. Operator	
Northwest Pipeline Corporation	
Address NA CAACA	
P.O. Box 90 - Farmington, NM 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	
Recompletion OII Dr	ry Gas
Change in Ownership Casinghead Gas	ondensate
If change of ownership give name and address of previous owner	
II. DESCRIPTION OF WELL AND LEASE	
Lease Name Weil No. Pool Name, Including F	· · · · · · · · · · · · · · · · · · ·
Burroughs Com B 4 Blanco Mesa Ve	erde state. XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Location	
Unit Letter M : 990 Feet From The South Lin	e and 1150 Feet From The West
Line of Section 2 Township 27N Range 91	W , NMPM, San Juan Count
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS
Name of Authorized Transporter of Cil or Condensate	Agazens (Give address to which approved copy of this form is to be sent)
Four-Four Inc.	P.O. Box 821 - Farmington, NM 87499
Name of Authorized Transporter of Castagneed Gas or Dry Gas X	Address (Give address to which approved copy of this form is to be sent)
·	P.O. Box 990 - Farmington, NM 87499
El Paso Natural Gas Company  'Unit Sec. 'Twp. 'Rge.	Is gas actually connected? When
If well produces oil or liquids, M 2 27 9W	i de
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.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
hereby certify that the rules and regulations of the Office provision Division have been complied with and that the information girphs trib and complete theme has to find knowledge and belief.	APPROVED JUN 1,0 1006
- · · · · · · · · · · · · · · · · · · ·	Supra
Ou 20N 1 0 1986	TITLE SUPERVISOR DISTRICT # 3
/ CONTRACTOR	This form is to be filed in compliance with RULE 1104.
Production & Drilling Clerk DIST. 3	If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with RULE 111.
(Title)	All sections of this form must be filled out completely for allo able on new and recompleted wells.
May 23, 1986	Fill out only Sections I. H. III. and VI for changes of own-
(Date)	well name or number, or transporter, or other such change of condition

completed wells.