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[RANSPORT CH	OIL			
	GAS	1		
OPERATOR				
PRORATION OFFICE				L
Operator				
Northwest Pipeline				

NEW MEXICO OIL CONSCRVATION COMMISSION

Form C-104 Supersedes Old C-104 and C-110

SANTA FE /	REQUEST	FOR ALLOWABLE	Effective 1-1-65		
FILE /	AUTHORIZATION TO TRA	. AND HISPORT OIL AND NATURAL G	AS		
LAND OFFICE	AOTHORIZATION TO TRA				
TRANSPORTER OIL	 				
GAS /					
PROBATION OFFICE					
Operator					
Northwest Pipe	eline Corporation				
	cive, Farmington, New Mexico	87401			
Reason(s) for filing theck prope	i box)	Other (Please explain)			
New Well	Change in Transporter of: Oil Dry Ga	ıs [X]			
Recompletion Change in Ownership	Casinghead Gas Conden	ו רֹסוֹ			
If change of ownership give na and address of previous owner	^{me} El Paso Natural Gas Compar	ny, PO Box 990, Farmingto	on, New Mexico 8/401		
DESCRIPTION OF WELL A	Well No. Pool Name, including r				
San Juan 29-6 Unit	44 Blanco Me	sa Verde State, Federa	l or f% Fee		
Location	Gouth	1650	rbe West		
Unit Letter N :	990 Feel From The South Lin				
Line of Section 26	Township 29N Range	6W , NMPM, Rio Ar	riba County		
		16			
DESIGNATION OF TRANS Name of Authorized Transporter	PORTER OF OIL AND NATURAL GA	Wadiess (Othe addiess to much appro-			
Northwest Pip	eline Corporation	501 Airport Drive, Far	mington, New Mexico 8740		
Name of Authorized Transporter	of Casinghead Gas 🚺 💮 or Dry Gas 🔀	Address (Give address to which appro	mington. New Mexico 8740		
Northwest Pip	eline Corporation		501 Airport Drive, Farmington, New Mexico 8740		
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Fige.				
	ed with that from any other lease or pool,	give commingling order number:			
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
Designate Type of Com					
Date Spudded	Date Compi. Ready to Prod.	Total Depth	P.B.T.D.		
,		01/0-2	Tubing Depth		
Elevations (DF, RKB, RT, GR,	Name of Producing Formation	Top Oll/Gas Pay	Tubing Bopin		
Perforations			Depth Casing Shoe		
Periorations					
		D CEMENTING RECORD DEPTH SET	SACKS CEMENT		
HOLE SIZE	CASING & TUBING SIZE		·		
		for a second value of land all	and must be equal to or exceed top allow		
TEST DATA AND REQUE	ST FOR ALLOWABLE (Test must be able for this d	lepth or be for full 24 hours)			
Date First New Oil Run To Tan	ks Date of Test	Producing Method (House Admin)	. 1		
		Casing Pressue	Cloke Size		
Length of Test	Tubing Pressure	191	4		
Actual Prod. During Test	Oil-Bbis.	Water-Bblo.	Gal - MCF		
		OIL CONT. 3			
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	Gravity of Condensate		
Actual Plos. Test-Mol/S			Charles Stee		
Testing Method (picot, back pr.	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
		OIL CONSERV	ATION COMMISSION		
CERTIFICATE OF COMP	LIANCE		62		
and the suite that the suite	a and regulations of the Oil Conservation	APPROVED	<u>B 7 1974</u>		
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Original Signed by A. R. Rendrick			
above is true and complete	to the best of my knowledge and a	TITLE PETROLEUM ENGI	THER DIST. NO. 3		
		11	compliance with RULE 1104.		
			If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation well, this form must be accompanied by a tabulation of the deviation		
(Signature)		tests taken on the well in accordance with notice that			
(Title)		able on new and recompleted walls.			
		Fill out only Sections I. II. III, and VI for changes of owner well name or number, or transporter, or other such change of condition			
	(Date)	Separate Forms C-104 mu	ist be filed for each pool in multi,		
		completed wells.			