STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION		
	1-	-
	1-	_
U.1.0.1.		_
LAND OFFICE		_
OIL		_
GAR		
OPERATOR		
PRORATION OFFICE		
	OIL GAB	OIL GAR

OIL CONSERVATION DIVISION. P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE

	ND		
	PORT OIL AND NATURAL GAS		
Operator		·	
Northwest Pipeline Corporation			
Address			
3539 E. 30th - Farmington, NM 87401			
Reason(s) for filing (Check proper box)	Other (Please explain)	·	
New Well Change in Transporter of:	3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
Recompletion OII Dr	y Gas .		
Change in Ownership Casinghead Gas	andensate		
		····	
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Well No. Pool Name, Including Fo	ormation Kind of Lease		
San Juan 29-6 Unit 60A Blanco Mesa	,	Fee No.	
Location	verde		
Unit Letter J : 1620 Feet From The South Lin	1490 East		
Lin	e andFeet From The		
Line of Section 18 Township 29N Range	6W , NMPM, Rio Arriba		
		County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS		
Name of Authorized Transporter of Off or Condensate XX	Address (Give address to which approved copy of this form is	to be senti	
Gary Energy Corporation	D O Doy 100 D7 5: 31 400		
Name of Authorized Transporter of Casinghead Gas or Dry Gas XX	Address (Give address to which approved copy of this form is	7413	
Northwest Pipeline Corporation EDG	2520 5 2041 5	i	
tinu See Tue ID-	1s gas actually connected? When	7401	
give location of tanks.	, ,,,,,,,		
		J	
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		
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	APPROVED	4 19000	
my knowledge and belief.	BY		
,	TITLE SUPERVISOR W	STRICT # 3	
	TITLE SUPERVISOR	STRICT W	
CAMAIO ACUMA	This form is to be filed in compliance with mut	.F 1104	
(Signature)	If this is a request for allowable for a newly delited as despend		
Production & Drilling Clerk	Well, this form must be accompanied by a tabulation of the deutestan		
	n & Drilling Clerk tests taken on the well in accordance with RULE 111. All sections of this form must be filled out accordance.		
June 2, 1988 All sections of this form must be filled out completely for allow able on new and recompleted wells.			
Fill out only Sections I II III and W for change of		inges of owner.	
,	wall name of number, of transporter, or other such char	ge of condition.	
ll l	Separate Forms C-104 must be filed for each completed wells.	pool in multiply	