STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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TRAMSPORTER	OIL	
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OPERATOR		\neg
PROSATION OFF	HC W	

OIL CONSERVATION DIV

at 05-01-83

P. O. BOX 2088

SANTA FE, NEW MEXICO 8750 OIL CON. DIV.

RECUEST FOR ALLOWABLE

AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Northwest Pipeline Corporation P.O. Box 90 - Farmington, New Mexico messon(s) for tiling (Check proper box) Oiner (Please explain) New Well Change in Transporter of: Recognistion Cit Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner_ II. DESCRIPTION OF WELL AND LEASE Well No. | Pool Name, Including Formation Kind of Lease Legse No 32 San Juan 29-6 Unit Blanco Mesa Verde XSXXX. Federal ox XXXX NM 012698 Location 1590 Feet From The South Line and 1090 West Unit Letter 29N Rio Arriba III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of CII or Condensate (XX Asasess (Give address to which approved copy of this form is to be sent) Mancos Corporation P.O. Drawer 1320 - Farmington, NM Name of Authorized Transporter of Castinghead Gas Address (Give address to watch approved copy of this form is to be sent) or Dry Gas IAA Northwest Pipeline Corporation P.O. Box 90 - Farmington, New Mexico Rge. Is gas actually connected? Unii Two. If well produces oil or liquids. 29N give location of tanks. 11 • 6W

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

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 my knowledge and belief.

Cario Harma	3
Carrie Harmon (Signature) Production & Drilling Clerk	
January 13, 1986	

(Date)

OIL CONSERVATION DIVISION

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 deepen. well, this form must be accompanied by a tabulation of the deviati tests taken on the well in eccordance with RULE 111.

All sections of this form must be filled out completely for alleable on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owns ell name or number, or transporter, or other such change of condition

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