STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

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DISTRIBUTION					
SAMTA PE					
FILE					
V.3.0.4.			1		
LAND OFFICE					
TRAMEPORTER	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

TRANSPORTER GAS		REQUEST FO	R ALLOW	ABLE		
OPERATOR AND						
PROBATION OFFICE	AUTHOR	IZATION TO TRANS	PORT OIL	. AND NATU	RAL GAS	
Cperator						
Northwest Pipeline Corpo	ration	ı				
Address			··· <u></u>			
P.O. Box 90 - Farmington	, New	Mexico 87499				
Reason(s) for filing (Check proper box)				Other (Pleas	e expiain)	
New Well	Change in	Transporter of:				
Recompletion	CII		ry Gas			
Change in Ownership	Casi	nghead Gas X C	andensate			
If change of ownership give name						
and address of previous owner		· · · · · · · · · · · · · · · · · · ·				
II. DESCRIPTION OF WELL AND LE	ASE	Pool Name, Including F	ermation		Kind of Lease	Legse No
	19	Blanco Mesa			XXX, Federal XXXX	SF 080379-
San Juan 29-6 Unit	13	DIANCO MESA	verde		!	
D 040		m The North Lir		1825	Feet From The East	
Unit Letter B : 940	_Feet Fro	m The NOI CII LIF	ne and	1020	Legit tow the Trans	
Line of Section 8 Township	, 7	.9N Range	6W	, NMPN	. Rio Arriba	County
				•		
III. DESIGNATION OF TRANSPORT	TER OF	OIL AND NATURAL	L GAS			
Name of Authorized Transporter of CII		ondensate 💢 .	Address	Give address	to which approved copy of thi	s form is to be sent)
Four-Four Inc.			P.0.	Box 821	- Farmington, NM	87499
Name of Authorized Transporter of Castagne	ad Cas	or Dry Gas (X)	1		to which approved copy of thi	07100
Northwest Pipeline Corpo	ratior					8/499 -
If well produces oil or liquids, Unit	Sec		is gas ac	tuaily connect	ed? When	
give location of tanks.	i	8 : 29N : 6W	1		<u>-</u>	
If this production is commingled with the	t from an	y other lesse or pool,	give com	ningling orde	r number:	
NOTE: Complete Parts IV and V on	TONOTCO (ide if necessary.				
			11			****
VI. CERTIFICATE OF COMPLIANCE				OIL C	ONSERVATION DIVIS	UPUN 10 1986
* b b	DOING.		APPR			19
I hereby certify that the rules and regulations of been complied with and that the information give	ing upon	romplete to the best of	1 2	JVEU	5 100	, ,,
my knowledge and belief.	1 4	5 B h	BY	•	1 Janks	
•	•	E WE -		22	PERVISOR DISTRICT	X
2 / 🙃	JUN	101986	TITLE			}
Cario La caract	1 ~ "	1980	71		be filed in compliance w	
MANUAL TRANSPORT	<u>`C</u>	100	II.	this is a req	uest for allowable for a ne t be accompanied by a tab	wly drilled or deepen
Production & Drilling Cl	PAST	V. Du	tests t	sken on the	well in accordance with F	ULE 111.
Title)	CI NO	3 -11/			this form must be filled o	ut completely for allo
May 30, 1986					completed wells.	to change of our
(Date)			Well no	wa or numba	Sections I. II. III. and VI r, or transporter, or other at	ich change of condition
					s C-104 must be filed for	
				ed wells.		