STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

Production & Drilling Cler

May 29, 1986

(Title)

(Date)

DISTRIBUTE	П	T	
BANTA FE	T		
FILE			
U.1.5.1.			
LANG OFFICE			
TAAMSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OF			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE. NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-63

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LAND OFFICE										•	
TRANSPORTER GAS		-		. DEC	VICET C		ARI E				
OPERATOR	1 3 }	\dashv	1		KE	FOES! P	OR ALLOY	ADLE			
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Operator							· · · · · · · · · · · · · · · · · · ·				
	est P	ipel	ine Corpo	ration	1				·		
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Recomplet	ton				. ,,		Dry Gas				
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If change of ov and address of											
and 100.012 01	, p										
II. DESCRIPT	TON C	F W	ELL AND LE	ASE							
Lease Name			Well No. Pool Name, Including Formation			Kind of Lease	c =	Lease N			
San Ju	<u>an 29</u>	-5 U	nit	74	Blanco	Mesa	<u>Verde</u>		XXXXXX Federal XXXXXX	SF	078281
Location											
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_										•	
Line of Sect	tton	17	Township	29N		Range	_ <u>5</u> W	, NMPM	<u>Rio Arriba</u>	· · · · · · · · · · · · · · · · · · ·	Coun
								•			
III. DESIGNA							AL GAS				
Name of Author	rized Tr	enspor	iet of OII 🗀	or C	ondensate [X i ⋅	Ascress	(Give address t	o which approved copy	of this form is to	o be sent/
Four-F	our I	nc.							 Farmington. 		
Name of Author						Ga≯ [X]	Address	(Give address t	o which approved copy	of this form is to	o be sentj
Northw	est P	ipel	ine Corpo	ration	ì <u> </u>				Farmington. I	<u>VM 87499</u>	
If well produce	e oil or	liquidi	Unit	• • •	•	Rg.	is gas a	tually connects	d? When		
give location o	í tanks.		<u> </u>	. ; 17	7 ; 29N	; 5W			<u> </u>		
If this producti	ion is c	ommi	igled with the	t from an	y other less	se or poo	l, give com	mingling order	number:		
			V and V on								
							11				
VI. CERTIFIC	CATE C	F CC	MPLIANCE	_				UIL CI	ONSERVATION C		1000
1 h	hh		11	4.0		inisian has	APPR	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	17001	DONITO	1986
I hereby centify the been complied wi	nat the n ith and th	uies an	a regulations of information give	ים וג נחוב או	nd combiete to	o the best (of APPR	0 4 EU - 3)	man. Col	-	
my knowledge an			()	(A)		BY_			X	
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	2		/	`^ [?]	Z W	•	TITL!	<u> </u>	SUPERVISOR DISTRICT	# 5	
//	/)/	へん		A	-	hie form is to	he filed in complian	nce 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 accordance with RULE 111.

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

Fill out only Sections I. II. III, and VI for changes of own well 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.