STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(
DISTRIBUTION		
SANTA FE		
FILE		
u.s.a.s.		
LAND OFFICE		
TRANSPORTER	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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.				
Operator				
Northwest Pipeline Corporation				
Address				
P.O. Box 90, Farmington, New Mexico 87499	37			
Resson(s) for filing (Check proper box) Other (Please explain)				
New Well Change in Transporter of:				
	Dry Gas Condensate Dis			
Change in Ownership Casinghead Gas Co	Dio 1			
If change of ownership give name				
and address of previous owner				
II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Fo	ormation Kind of Lease Lease No.			
San Juan 29-6 Unit 53A Blanco Mesa V	CT CC TANAL WATER THE GOOD TO THE			
	1570 Fac+			
Unit Letter 0 : 800 Feet From The South Line	e and 1570 Feet From The East			
Line of Section 3] Township 29N Range	6W , NMPM, Rio Arriba County			
County 21 Township 2314 Hande OW Therefore MID MITTER				
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil or Condensate				
UPG, Inc.	P.O. Box 66, Liberal, Kansas 67901			
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)			
Northwest Pipeline Corporation P.O. Box 90, Farmington, New Mexico 87499				
If well produces all or liquids. Unit Sec. Twp. Rge. Is gos actually connected? When				
give location of tanks. O : 31 : 29N · 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 OIL CONSERVATION DIVISION				
INNIA 1 1990				
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.	BY_ Drank			
	Y			
	TITLE SUPERVISO DISTRICT # 3			
9Kind (i m. R	This form is to be filed in compliance with RULE 1104.			
11/1/1/() // /CCCCCC - The transfer of allowable for a newly drilled or dea				
Linda S. Marques (Signature) well, this form must be accompanied by a tabulation of the devia tests taken on the well in accordance with RULE 111.				
Production and Uniting Clerk				
able on new and recompleted wells.				
January 24, 1985 Fill out only Sections I. II. III. and VI for changes of well name or number, or transporter, or other such change of con				
(2-14)	Separate Forms C-104 must be filled for each pool in multip:			
	completed wells.			