## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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POLITURINTALO			
SANTA FE			
FILE			
u.s.d.a.			
AND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERAT DR			
SECONT OF SERVE			

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

Separate Forms C-104 must be filed for each pool in multip:

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Northwest Pipeline Corporation			
P.O. Box 90, Farmington, New Mexico 87499			
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:	2200 - The state of the state o		
Recompletion Oil Dry	Gas \\alpha\lambda\lamb		
Change in Ownership Casinghead Gas	Gas FEB 01 1900		
I change of ownership give name on address of previous owner			
I. DESCRIPTION OF WELL AND LEASE			
Lease Name   Well No.   Pool Name, Including For			
San Juan 29-6 Unit   65A   Blanco Mesa Ver	de skalaaraa FEE		
Unit _etter J : 1550Feet From TheSouth _Line and1550Feet From The _East			
Line of Section 19 Township 29N Range	6W , NMPM, Rio Arriba County		
Mame of Authorized Transporter of Casingnead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  P.O. Box 66, Liberal, Kansas 67901  Name of Authorized Transporter of Casingnead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  El Paso Natural Gas Company  P.O. Box 990, Farmington, New Mexico 87499			
If well produces oil or liquids, J 19 29N 6W	1		
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 vertify 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 know edge and belief.	APPROVED FEB 1,91985		
/)	TITLE SUPERVISOR DISTRICT 20 5		
This form is to be filled in compliance with BULE 1104			
Dina Dellacation 5	If this is a request for allowable for a newly drilled or deepene		
Production and Drilling Clerk  well, this form must be accompanied by a tabulation of the tests taken on the well in accordance with RULE 111.			
(Title)  All sections of this form must be filled out completely for allo abla on new and recompleted wells.			
January 30, 1985	Fill out only Sections I. II. III, and VI for changes of owne well name or number, or transporter or other such change of condition		

completed wells.