

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION 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	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> Condensate

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 29-6 Unit	Well No. 6A	Pool Name, Including Formation Blanco Mesa Verde	Kind of Lease XXX Federal XXX	Lease No. NM 03040
Location Unit Letter <u>C</u> : <u>1095</u> Feet From The <u>North</u> Line and <u>1780</u> Feet From The <u>West</u> Line of Section <u>21</u> Township <u>29N</u> Range <u>6W</u> , NMPM, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Four-Four Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 821 - Farmington, NM 87499								
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 990 - Farmington, NM 87499								
If well produces oil or liquids, give location of tanks.	<table border="1"> <tr> <td>Unit</td> <td>Sec.</td> <td>Twp.</td> <td>Rge.</td> </tr> <tr> <td>C</td> <td>21</td> <td>29N</td> <td>6W</td> </tr> </table>	Unit	Sec.	Twp.	Rge.	C	21	29N	6W
Unit	Sec.	Twp.	Rge.						
C	21	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

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information herein is true and complete to the best of my knowledge and belief.

Corrie Holman
(Signature)
Production & Drilling Clerk
(Title)
May 29, 1986
(Date)

OIL CONSERVATION DIVISION JUN 10 1986

APPROVED *Frank J. [Signature]*, 19
BY *[Signature]*
TITLE 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 deviate tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiple completed wells.