STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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| DISTRIBUTION | | | 1 |
| SANTA PE | | | _ |
| FILE | | 1 | |
| U.S.O.E. | | | |
| LANG OFFICE | | | |
| TRANSPORTER | OIL | | |
| | DAS | | _ |
| OPERATOR | | | |
| PROBATION OFFICE | | | |

SANTA FE, NEW MEXICO 87501

Form C-104

Ann an green a graph an gene brengen appground properties and properties and a giby

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

REQUEST FOR ALLOWABLE

| | ND PORT OIL AND NATURAL GAS |
|---|---|
| Operator | |
| Northwest Pipeline Corporation | |
| Address | |
| 3539 E. 30th - Farmington, NM 87401 | |
| Reason(s) for filing (Check proper box) | Other (Please explain) |
| New Well Change in Transporter of: | The state capture, |
| Recompletion OII Dr | ry Gas |
| Change in Ownership Casinghead Gas XX Co | ondensate |
| If change of ownership give name and address of previous owner | |
| II. DESCRIPTION OF WELL AND LEASE | |
| Lease Name Well No. Pool Name, including Fo | ormation Kind of Lease |
| San Juan 29-6 Unit 46A Blanco Mesa | Lagra 140. |
| Location | |
| Unit Letter D 940 Feet From The North Lin | e and 790 Feet From The West |
| Line of Section 27 Township 29N Range | 6W , NMPM, Rio Arriba County |
| III DESIGNATION OF TRANSPORTER OF OUR | |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL Name of Authorized Transporter of Oil or Condensate XX | Address (Give address to which approved copy of this form is to be sent) |
| Gary Energy Corporation | P.O. Box 159 - Bloomfield, NM 87413 |
| Name of Authorized Transporter of Casinghead Gas or Dry Gas 🖎 Northwest Pipeline Corporation | Address (Give address to which approved copy of this form is to be sent) 3539 E. 30th - Farmington, NM 87401 |
| If well produces oil or liquids. Unit Sec. Twp. Rge. Qive location of tanks. D 27 29N 6W | Is gas actually connected? When |
| If this production is commingled with that from any other lesse or pool, | give commingling order number: |
| • | |
| NOTE: Complete Parts IV and V on reverse side if necessary. | |
| VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION 1988 | |
| I hereby certify that the rules and regulations of the Oil Conservation Division have | APPROVED |
| ocen complied with and that the information given is true and complete to the best of my knowledge and belief. | |
| my movietage and benefit | BY |
| TITLE SUPERVISION DISTR | |
| (GAAIA 4 GAAAAA | This form is to be filed in compliance with RULE 1104. |
| If this is a request for allowable for a newly drilled on d | |
| Production & Drilling Clerk well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with AULE 111. | |
| (Title) All sections of this form must be filled out completely | |
| Fill out only Sections I, II, III, and VI for changes of | |
| [DOIT] | Well name or number, or transporter or other such about a |