STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTE		,		
SANTA PE		_		
FILE				
U.S.O.S.		1		
LAND OFFICE				
TRANSPORTER	OIL			
	GAS			
OPERATOR				
PRORATION OFFICE			\neg	

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 multiple completed wells.

TRANSPORTER GAS			•	•	
OPERATOR	REQUEST	FOR ALLOW	ABLE	· · · · · · · · · · · · · · · · · · ·	
PROPATION OFFICE		AND		•	an PE M
I. AUTH	ORIZATION TO TR	ANSPORT OIL	LAND NAT	URAL GAS	IN BIN
Operator				E CE	
Northwest Pipeline Corporati	on ·			(1) R	-05
Address					31982
P.O. Box 90, Farmington, New	Mexico 87499		. *	URAL GAS JANO	7/9°3
Reeson(s) for filing (Check proper box)			Other (Pleas	se explain))\``
New Well Change	in Transporter of:		Į	OIL D	151. 3
Recomplation OI	ı [Dry Gas			`.
Change in Ownership Co	singhead Gas	Condensate		•	
If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE		-			
	o. Pool Name, Includ	ing Formation		Kind of Lease	
Gobernador 2	Gobernador	-	01:55-	i i	Lease No.
Location	GODETHAGOT	rictured	CILLIS	NAWANAWANAWA	Fee
1 .	rom The South	_Line and <u>18</u>	340	Feet From The East	
	N Range			u, Rio Arriba	County
III. DESIGNATION OF TRANSPORTER OF Name of Authorized Transporter of Oil or UPG, Inc.	FOIL AND NATU	Address		to which approved copy of this	•
Name of Authorized Transporter of Casinghead Gas		P.U.	BOX 66,	Liberal, Kansas 679	01
l .	· ·			to which approved capy of this	•
Northwest Pipeline Corporatio	··	P.O.	Box 90,	Farmington, New Mex	ico 87499
it well produces off or fidulas,	14 29N 51		ually connec	ed? When	
If this production is commingled with that from	any other lease or p	ool, give comm	ingling orde	r number:	
NOTE: Complete Parts IV and V on reverse	side if necessary.				
VI. CERTIFICATE OF COMPLIANCE			OIL C	CONSERVATION DIVISION	אכ
I hereby certify that the rules and regulations of the Oil	Conservation Division b	Tave APPRO)\{E_D	JAI	N = 7.1985
been complied with and that the information given is true					7 7 7 1000
my knowledge and belief.	·	BY		80///	
		ll l		alternation.	Davey
Ω		TITLE		SUPERVISI	OR DISTRICT # 3
A Sum		⊋∥ _™	is form is to	be filed in compliance with	6 RULE 1104.
Tinda S. Maguer		·) ((uest for allowable for a new	
Linda S. Marques (Signature)		well, th	is form mus	t be accompanied by a tabul	ation of the deviation
Production and Drilling Clerk	. — — — — — — — — — — — — — — — — — — —	!1		well in accordance with AU	
January 3, 1985		able on	new and re	this form must be filled out completed wells.	
(Date)		Well ner	l out only : ne or numbe	Sections I, II, III, and VI for, or transporter, or other such	or changes of owner tohange of condition