STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

PG. 00 (00110 114	41-4-	Γ	
DISTRIBUTION			
BANTA PE		T	
PILE		Τ_	
U.S.G.S.			
LANG OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROMATION 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

Fill out only Sections I. II. III, and VI for changes of owns well name or number, or transporter, or other such change of condition

completed wells.

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

REQUEST FOR ALLOWABLE

OPERATOR		•	AND		•		,	
PROBATION OFFICE	AUTHORIZA	TION TO TRANS		LITAN DNA	RAL GAS			
<u>I.</u>								
Operator								
Northwest Pipeline Corpo	ration	- · <u>_ · · · _ · · · · · · · · · · · · · </u>						
Address								
P.O. Box 90 - Farmingtor	i, New Mex	ico 87499						
Reason(s) for filing (Check proper box)				Other (Please	explain)			
New Aoli	Change in Tra							
Recompletion	⊢ °"	<u> </u>	TY Gas	İ				
Change in Ownership	Casinghed	ad Gas N	ondensate	! <u></u> _				
If change of ownership give name								
and address of previous owner		•						
II. DESCRIPTION OF WELL AND LE	ASE No. I Poo	I Name, Including F	armation		Kind of Lease		Lease N	
San Juan 29-5 Unit		Blanco Mesa			NAMES Federal MANAGE	SF	079851	
Location	1 127	Dianco nesa	Verue		XXXX, SSSS XXXX		1073031	
1		Noseth		700		Maa+		
Unit LetterU :1030	_ Feet From Th	North th	ne and	790	_ Feet From The	west	 	
20 -	20N	_	EU		Dia Amaila		_	
Line of Section 30 Township	⊳ 29N	Hande	5W	, NMPM	Rio Arriba		Count	
III DESIGNATION OF TRANSPORT	TTR OF OIL	AND NATION	T C 15					
MIL. DESIGNATION OF TRANSPORT		AND INATURA	L GAS	Give address s	o which approved copy	of this form is to	be sent)	
Four-Four Inc.		70.	חם	Boy 821	- Farmington,	NM 87/100	a	
Name of Authorized Transporter of Castaghe	ad Gas	or Dry Gas IX	Address (Give address t	o which approved copy	of this form is to	be sent)	
Northwest Pipeline Corpo								
1101	\$ \$ \$ ec.	Twp. Rge.	is gas ac	Is gas actually connected? When				
If well produces all or liquids,	D 30	29N : 5W			i		•	
		<u> </u>				· <u> </u>		
If this production is commingled with the	it from any oth	her lease or pool,	give comm	ningling order	number:			
NOTE: Complete Parts IV and V on	reverse side i	if necessary.						
			11	O1 C	DAICEDMATION D	0.40504		
VI. CERTIFICATE OF COMPLIANCE	PA			טוג טו	DNSERVATION D	1 MUEIVI	0 1980	
I hereby certify that the rules and regulation of	Se Or Bed	arion Division have	APPRO	OVED >	_	.	19	
been complied with and that the information give	en is true and of	me te set of		2	1768			
my knowledge and belief.	JUN		BY	- U)4.	A. C.	/		
Ou	CON D	. : : : : : : : : : : : : : : : : : : :		À	WERVISOR DISTRICT	3		
		6	TITLE		V			
((()))	20V V	· - P	Th	is form is to	be filed in compliant	cs with RULE	1104.	
- Carrie Mans	157	<u>v</u> 3	11	this is a requ	est for allowable for	a newly drille	d or deeper	
Production & Drilling Cl	erk	•	well, th	nis form must aken on the w	be accompanied by a vell in accordance wi	ertabulation of ith mulif 111.	tue devist	
			11		this form must be fill		_	
May 27, 1986 (Tule)				able on new and recompleted wells.				