## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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MOLTURINTALO		
SANTA PE		
PILE		
U.B.G.4.		П
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROBATION OFFICE		

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83

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

REQUEST FOR ALLOWARIE

CONTRATOR	IN THE STATE OF TH		
AND  AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
I.	ORT DIE AND NATURAL GAS		
Operator			
Northwest Pipeline Corporation			
Address			
P.O. Box 90, Farmington, New Mexico 87499	TO EINE M		
Reeson(s) for filing (Check proper box)			
·	Other (Please explicitly See See See See See See See See See Se		
New Well Change in Transporter of:	101		
	100 100 100 100 100 100 100 100 100 100		
Change in Ownership Casinghead Gas A Con	ndensate JAII		
Change in Ownership Casinghead Gas A Condensate  OIL CON.  DIST 3			
If change of ownership give name and address of previous owner			
	Dion		
II. DESCRIPTION OF WELL AND LEASE			
Lease Name   Well No.   Pool Name, Including Fo	ormation Kind of Lease Lease No.		
San Juan 29-5 Unit 100 Blanco Mesa Ver	de Skark Foderal Sk Ex SF D78917		
Location	de MAAA AAAA G. p. G. II.		
1005	11cr Fact		
Unit Letter G: 1885 Feet From The North Line and 1165 Feet From The East			
5H			
Line of Section 25 Township 29N Range	5W , NMPM, Rio Arriba County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS		
Name of Authorized Transporter of Oil or Condensate			
UPG, Inc.	P.O. Box 66, Liberal, Kansas 67901  Address (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Casinghead Gas or Dry Gas (Address (Give address to which approved copy of this form is to be sent)			
Northwest Pipeline Corporation	P.O. Box 90, Farmington, New Mexico 87499		
Unu Sec. Two Rge.	Is gas actually connected? When		
If well produces oil or liquids, G 25 29N 5W	ı		
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.			
NOTE: Complete Parts IV and V on reverse side if necessary.	11		
71. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION			
VI. CERTIFICATE OF COMPENSAGE	JAN 1985		
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED		
een complied with and that the information given is true and complete to the best of			
my knowledge and belief.	BY		
	TITLE SUPERVISOR DISTRICT # 3		
	TITLE		
This form is to be filed in compliance with RULE 1104.			
Minda . Margello II this is a request for allowable for a newly drilled or			
linda C Marques (Signature)   well, this form must be accompanied by a tabulation of the deviation			
Production and Drilling Clark   tests taken on the well in accordance with well in			
All sections of this form must be filled out completely for able on new and recompleted wells.			
January 14, 1985  Fill out only Sections I. II. III. and VI for changes of own			
(Date)   Well name or number, or transporter, or other such change of condit			
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