STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTME	·NT			•			
OISTRIBUTION	•	OIL CONSERVATION DIVISIOD ECE V Fr. 01.78					
PILE			(11)				
U.S.O.A.	SANTA F	SANTA FE. NEW MEXICO 87501 1 FEB 2 71986					
LAND OFFICE	• • • •						
TRANSPORTER GAS I	RECU	EST FOR ALLOWABL	LE ON CO	N. DIV.			
OPERATOR	•	AND	51	37 3			
PROBATION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
Dper eller			· 	·			
	. Company			er en de la companya			
El Paso Natural Ga	s Company		· · · · · · · · · · · · · · · · · · ·	·			
Address	``````		\$				
P. O. Box 4289, Fa		· · · · · · · · · · · · · · · · · · ·		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Resconts for tiling (Check proper bos		i i	er (Please explain)				
Mer Aell	Change in Transporter of	· — I					
Recompletion	<u> </u>	Dry Gas					
Change In Ownership	Casinghead Gas	Condensate					
If change of ownership give name and address of previous owner	D. F. C. C.	<u>.</u>					
II. DESCRIPTION OF WELL AN	D LEASE Well No. Pool Name, inc	luding Cormanon	Kind of Lease	Le			
- -		Mesa Verde	State, (Federal br F				
San Juan 29-7 Unit	45A Blanco M	lesa verde	15.6.5, (56.7.5)				
Unit Letter F : 154	O Feet From The Nort	h Line and 160	Feet From The	West			
Line of Section 20 Tow	mahip 29N Ro	nge 7W	, NMPM, Rio Ar	riba			
III. DESIGNATION OF TRANSF							
Name of Authorized Transporter of CII	or Condensate		address to which approved co				
El Paso Natural Gas C		P. O. Box 4289, Farmington, NM 87499					
Name of Authorized Transporter of Cas	ingneed Gas or Dry Gas		address to which approved co				
El Paso Natural Gas C	ompany		x 4289, Farmingtor	1, NM 87499			
If we'l produces oil or liquids, give location of tanks,	Unit Sec. Twp. F 20 29N	7W No	connected? When				
this production is commingled with	h that from any other lease o	r pool, give commingli	ng order number:				
NOTE: Complete Parts IV and V	on reverse side if necessar	y. 	,s. e.				
1. CERTIFICATE OF COMPLIAN		OIL CONSERVATION DIVISION					
hereby certify that the rules and regulation	or of the Oil Conservation Division	on have APPROVE	, MA	R 07 1996.			
een complied with and that the information with knowledge and belief.	n given is true and complete to the	best of BY	Original Signed by CHAR				
•			DEPUTY OIL & C	GAS INSPECTOR, DIST. #			
		TITLE	m is to be filed in compli				
1 Valla	1800111111	11	n a request for allowable	•			
(Signati	201		m must be accompanied b				

tests taken on the well in accordance with AULE 111.

All sections of this form must be filled out completely for a able on new and recompleted wells.

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

Separate Forms C-104 must be filled for each pool in mul completed wells.

Drilling Clerk

(Tille) 2-27-86

(Dose)

		-	,	/			
STATE OF NEW MEXICO		*	· /	1.074			
ENERGY MO MINERALS DEPARTMENT			/.	LEGEI!	Form C-104		
			(7)	FEB 2 71986 DIL CON. DIN	Revised 10-01-78		
DISTRIBUTION O	IL CONSER	NOITAL	DIVISIO	ON A B	E PA		
FILE	P. O.	BOX 2088	*	FEB = -	~ ////		
U.8.0.s.	SANTA FE, N	EW MEXIC	CO 8750/ /	1986	יש		
LAND DIFICE			~ _	IL COM			
TRANSPORTER OIL	DECVIECT I	.02 41 624	401 =	DION. DI	(/		
OPERATOR .	REGUEST F	AND	ABLE	UIST, 3	/.		
PROBATION CRAFE	IZATION TO TRAN	AND		•			
I.	IZATION TO TRAC	SPORT OIL	AND NATU	IKAL GAS			
Operator	•						
El Paso Natural Gas Company							
Address					······································		
P. O. Box 4289, Farmington, I	NM 87499				+ + +		
Ressoris) for tiling (Check proper box)			Other (Please	e expiain)			
X New Weil Change in	Transporter of:			**			
Recompletion Oil		Dry Gas					
Change in Ownership Casin	ghead Gas	Condensate			•		
		<u> </u>					
If change of ownership give name				•			
and address of previous owner							
II. DESCRIPTION OF WELL AND LEASE							
	Pool Name, including	Formation		Kind of Lease	Legae		
San Juan 29-7 Unit 45A	Basin Dakota			State, Federal or Fee	SF 078424		
Location							
	- North .	1	605 .	V	Vest		
Unit Letter F : 1540 Feet From	The Note L	ine and		Feet From The			
Line of Section 20 Township 29N	· Range	7W	, NMPM,	Rio Arril	oa Cou		
Cine of Section 20 Township 2511	- Trange		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1120 11221			
III. DESIGNATION OF TRANSPORTER OF O	II AND NATIRA	I GAS					
	ndensate M		ive address t	o which approved copy o	f this form is to be sent)		
		l p n	Box 4289	Farmington N	VM 87499		
El Paso Natural Gas Company Name of Authorized Transporter of Casinghead Gas	or Dry Gas (X	P. O. Box 4289, Farmington, NM 87499					
<u> </u>			P. O. Box 4289, Farmington, NM 87499				
El Paso Natural Gas Company			Is gas actually connected? When				
If well produces oil or liquids, Unit Sec.	· · · · · · · · · · · · · · · · · · ·		_	-, ,	:		
give location of tanks. F 20			lo				
If this production is commingled with that from any	other lesse or pool	, give commu	ngling order	number:			
NOTE: Complete Parts IV . IV	la if macarram						
NOTE: Complete Parts IV and V on reverse sia	e ij necessury.						
VI. CERTIFICATE OF COMPLIANCE	•	11	סוג ככ	INSERVATION DI	VISION		
VI. CERTIFICATE OF COMPETANCE		11		MAI	R 0.7 1000		
I hereby certify that the rules and regulations of the Oil Con-	servation Division have	APPROV	/ED	.,			
been complied with and that the information given is true and complete to the best of my knowledge and belief.			Detained stand by CHARLES GUALSON				
			BY Original Signed by CHARLES GHOLSON				
		TITLE_	DEF	UTY OIL & GAS INSPE	CTOR, DIST. #3		
			This form is to be filed in compliance with RULE 1104.				
- Caroli Jan	my -				newly drilled or deepe		
(Signature)				be accompanied by a ell in accordance wit	tabulation of the devia		
Drilling Clerk					d out completely for all		
(Title)				empleted wells.			
2-19-86		Fin	out only 5.	ctions I. II. III. and	VI for changes of ow		
(Date)			well name or number, or transporter, or other such change of condit				

Separate Forms-C-104 must be filled for each pool in mult completed wells.