## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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V.S.G.A.			
LAMO OFFICE		1	
TRANSPORTER	OIL	1	
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OPERATOR			
PROGATION OF	HCK		

## OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501



REQUEST FOR ALLOWABLE AND

DIL CON. DIV.

I. AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GAS UISI. 3
Operator	
Northwest Pipeline Corporation	· · · · · · · · · · · · · · · · · · ·
Address	
P.O. Box 90 - Farmington, New Mexico 87499	
Resson(s) for tiling (Check proper box)	
New Well Change in Transporter of:	Other (Please explain)
Remodelice	Dry Gaa
Change in Ownership	Condensate
If change of ownership give name and address of previous owner	
II. DESCRIPTION OF WELL AND LEASE	
Lease Name Well No.   Pool Name, Including	<u> </u>
	Lease N
Location Unit 7 Blanco Mesa	Verde State Foderal State NM 03190
Unit Letter G: 1540 Feet From The North Li	ine and 2430 Feet From The East
Line of Section 17 Township 32N Range 1	11W , NMPM, San Juan County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	al GAS
Mancos Corporation	P.O. Drawer 1320 - Farmington, NM 87499
Name of Authorized Transporter of Casinghedd Gas or Dry Gas (A).  Northwest Pipeline Corporation	P.O. Box 90 - Farmington, New Mexico 87499
If well produces oil or liquids.  G 17 32N 11W	is gas actually connected? When
I this production is commingled with that from any other lease or pool,	give commingling order number:

verse side if necessary.

## VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

CarrioHarman	围
Carrie Harmón (Signalwa) Production & Drilling Clerk	
January 2, 1986	
(Date)	

UIL	CONSERV	/ATION:	DIVISION
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OIL CONSERVATION DIVISION			
APPROVED	> JAM 2 0 1986		
BY	Trank . Java		
TITLE	SUPERVISOR OSTRICT # 3		

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepenwell, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I. II. III, and VI for changes of owne well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multip completed wells.