## STATE OF NEW MEXICO ARTMENT

ENERGY MO MINERAL		DEP
DISTRIBUTION	$\vdash$	,
SANTA PE	_	<del>                                     </del>
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER OIL		
GAB		
OPERATOR .	$\neg$	$\neg$
PROMATION OFFICE		$\neg$
I.		
Operator		
Northwest Pipe	eli	ine
Address		
3539 E. 30th -	- F	ar

SANTA FE, NEW MEXICO 87501

Revised 10-01-78

OPERATOR REQUEST FO	OR ALLOWABLE MAY2 5 1988
PRONATION OFFICE	AND 4 5 1980 W
I. AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GAST CON. DIN
Operator	N. DIL
Northwest Pipeline Corporation	UST. 3 -1V.
7.001	
3539 E. 30th - Farmington, NM 87401	
Maria Wali	Other (Please explain)
Change in Hansporter of:	
	ry Gas
Change in Ownership Casinghead Gas	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 F	
Cox Canyon Unit 15 Blanco Pictur	Loase
Location	red Cliffs   SXXXX Federal XXXXX NM 0318 9
Unit Letter D : 1180 Feet From The North Lin	e and West
Line of Section 21 Township 32N Range	11W NMPM San Juan
Trange	NMPM, Sall UUdil Cour
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	CAS
or Condensate (X)	Addisss (Give address to which approved copy of this form is to be sent)
Gary Energy Corporation	P O Roy 150 Plantical Alle Orice
Name of Authorized Transporter of Casinghead Gas or Dry Gas [X]	P.O. Box 159 - Bloomfield, NM 87413  Address (Give address to which approved copy of this form is to be sent)
Northwest Pipeline Corporation	1 2520 F 2011 F
If well produces oil or liquids, Unit Sec. Twp. Rgs.	Is gas actually connected? , when
give location of tanks. D 21 32N 11W	a margine A
f this production is commingled with that from any other lease or pool,	give commingling order numbers
NOTE: Complete Parts IV and V on reverse side if necessary.	
7. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
hereby certify that the rules and regulations of the Oil Conservation Division have	l

my knowledge and belief.

Criscio Harman	
Production & Drilling Clerk	

(Title)

(Dote)

May 20, 1988

APPROVED	MAY	25 1988		19
BY		d.		
TITLE	orpuist	ON DISTRI	CT#3	

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

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

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

Fill out only Sections I, II, III, and VI for changes of ow. 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.