STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE AND

OIL CON DIL AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Northwest Pipeline Corporation 3539 E. 30th - Farmington, NM 87401 Reeson(s) for filing (Check proper box) Other (Please explain) . New Well Change in Transporter of: Recompletion OH Change in Ownership Cazinghead Gaz Condensate If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE Well No. | Pool Name, Including Formation Kind of Lease Legse N Cox Canyon Unit 7A Blanco Mesa Verde χέχοχο, Federal χιχέχωχ NM03190 Location 840 Feet From The South Line and 2110 Unit Letter East 17 Line of Section Township 11W Range San Juan NMPM. III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) Gary Energy Corporation P.O. Box 159 - Bloomfield, NM 87413 Name of Authorized Transporter of Casinghead Gas or Dry Gas (X) Address (Give address to which approved copy of this form is to be sent) . Northwest Pipeline Corporation 3539 E. 30th - Farmington, NM Rge. Is gas actually connected? If well produces oil or liquids, give location of tanks. 17 32N · 11W

If 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.

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.

Production & Drilling Clerk (Title)

May 20, 1988

Date

OIL CONSERVATION DIVISION

APPROVED	MAY 25 1229, 19
BY	7
TITLE	SUPERSON

This form is to be flied in compilance with RULE 1104.

If this is a request for allowable for a newly drilled or deeps: well, this form must be accompanied by a tabulation of the deviat ts taken on the well in accordance with MULE 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 own ill name or number, or transporter, or other such change of conditi

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