NO. OF COPIES RECEIVED			
DISTRIBUTION		•	•
<u></u>	1	CONSERVATION COMMISSION	Form C-104
SANTA FE	REQUES	FOR ALLOWABLE	Supersedes Old C-104 and C-1 Effective 1-1-65
FILE	-	AND	
U.S.G.S.	_ AUTHORIZATION TO TR	PANSPORT OIL AND NATURAL	GAS
LAND OFFICE	_		
TRANSPORTER GAS	-		
OPERATOR	7		
PRORATION OFFICE			
Cperator			
Conoco Inc.			
P.O. Box 461 Reason(s) for filing (Check proper bo		Other (Please explain)	
		,	
New We!I	Change in Transporter of:		orate name from
Recompletion Change in Ownership	OII Dry ( Casinghead Gas Cond	Gas Continental Oi Lensate July I, 1979.	1 Company effective
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL ANI	) LEASE		
Lease Name	Weil No. Pool Name, Including	Formation Kind of Lea	ise Leaso No.
MCA Unit Bt	101 Maliamar	G-SA State, Fede	eral or Fee LC - 0294
Location	1017 81381161		
Unit Letter:	Feet From The	ine and 1980 Feet From	<b>(</b> ~
Line of Section 9	Yownship 17-5 Range	32 F , NMPM, L	ea County
DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL O	GAS	
Name of Authorized Transporter of C			
Name of Administration in the	or Condensate	Address (Give address to which app	proved copy of this form is to be sent)
Novain Pipeline	or Condensate   Om Pany	N. Freeman Ave. A	rtesia NM
Novaio Pipeline	( on 1	N. Freeman Ave. A	roved copy of this form is to be sent)  THESIZ NM  proved copy of this form is to be sent)
Navajo Pipeline	Casinghead Gas or Dry Gas	N. Freeman Ave. A Address (Give address to which app  No Freeman Ave. A Address (Give address to which app	rtesia NM
Navajo Pipeline Name of Authorized Transporter of Continental Oil Co	Casinghead Gas Tor Dry Gas To Gas Torong Plant No. 6	Address (Give address to which app  N. Freeman Ave. A  Address (Give address to which app  O. P. D. Box 1206, N  Is gas actually connected?	oroved copy of this form is to be sent)  Aaljamar, NM When
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I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Signature) Division Manager (Title)

JUN 5 1979

NMOCD (5) USGS (2) PARTNEW

<u>District Supervisor</u>

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

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

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

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

Separate Forms C-104 must be filed for each pool in multiply completed wells.

CHENED

JUNA 8 1979

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