STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

Carrie Harmon Signature/ Production & Drilling Clerk

<u>January 14, 1986</u>

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TRAMSPORTER	OIL		
	DAS		
OPERATOR			
PROBATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE

PRONATION OFFICE	AUTHORIZATION TO TR	AND RANSPORT OII	L AND NATURAL (GAS DIST. 3	IV.)	
Operator Northwest Pipeline Corp	poration	-		2.01. 3		
Address			· · · · · · · · · · · · · · · · · · ·			
P.O. Box 90 - Farmingto	on, New Mexico 87	499				
Ressoris) for filing (Check proper box)	· · · · · · · · · · · · · · · · · · ·		Other (Please expla	inj		
New Woll	Change in Transporter of:					
Recompletion	OII	Dry Gas				
Change in Ownership	Casinghead Gas	Condensate				
Change of awnership give name and address of previous owner						
I. DESCRIPTION OF WELL AND I	FASP					
Lease Name	Well No. Pool Name, including Formation		Kind	of Lease	Lease No	
San Juan 29-6 Unit	43A Blanco Mes	a Verde	***	XXXXXXXXX F••	Fee	
Unit Letter J : 1755 Line of Section 26 Townsh		C14	840 F↔	Rio Arriba	County	
III. DESIGNATION OF TRANSPOR			Consoders espisie		· .	
Mancos Corporation			P.O. Drawer 1320 - Farmington, NM 87499			
Name of Authorized Transporter of Casing Northwest Pipeline Corp				h approved copy of this for ington, New Mexi		
If well produces all or liquids, give location of tanks.		W Is gas ac	tually connected?	When 1		
this production is commingled with the	hat from any other lease or	ool, give comm	ningling order number	:r		
NOTE: Complete Parts IV and V or	n reverse side if necessary.	II				
7. CERTIFICATE OF COMPLIANCE			OIL CONSERVATION DIVISION			
hereby certify that the rules and regulations of een complied with and that the information gives however, and helief		est of	S)	rank . Java	1 1900	
by knowledge and belief.		TITLE	SUPERVISOR DISTRICT # 3			
$A \sim A$			In (a) In the No. (1)	-d (() ()		

If this is a request for allowable for a newly drilled or deepen: well, 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 conditio

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