STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

-		
DISTRIBUTION		
FILE		
U.1.0.1.		
LAND OFFICE		
DIL		
GAR		
OPERATOR		
PRORATION OFFICE		
	OIL.	OIL.

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Revised 10-01-78 Format 06-01-83

Form C-104

AND NATURAL GAS

REQUEST FOR ALLOWABLE

I.	PORT OIL AND NATURAL GAS
Operator	
Northwest Pipeline Corporation	
Address	
3539 E. 30th - Farmington, NM 87401	and the state of the
Resson(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	
	ry Gax
Change in Ownership Casinghead Gas X Ca	ondensate
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 25 Blanco Picture	ed Cliffs XXXXX NM U3189
Location	
Unit Letter 0 : 1080 Feet From The South Lin	ie and 1450 Feet From The East
Line of Section 9 Township 32N Range	11W , NMPM, San Juan
M. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL Name of Authorized Transporter of Oil or Condensate (X) Gary Energy Corporation Name of Authorized Transporter of Casinghead Gas or Dry Gas (X) Northwest Pipeline Corporation If well produces oil or liquids, Unit Sec. Twp. Rgs. give location of tanks. 0 9 32N 11W	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159 - Bloomfield, NM 87413 Address (Give address to which approved copy of this form is to be sent) 3539 E. 30th - Farmington, NM 87401 Is gas actually connected? When
If this production is commingled with that from any other lease or pool,	give commingling order number:
NOTE: Complete Parts IV and V on reverse side if necessary.	•
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
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	APPROVED, 19
my knowledge and belief.	BY
α	TITLE SU
$\frac{1}{2}$	This form is to be filed in compliance with RULE 1104.
- UNU Hamor	If this is a request for allowable for a newly drilled or deep
Production & Drilling Clerk	well, this form must be accompanied by a tabulation of the devia tests taken on the well in accordance with RULE 111.
(Title)	All sections of this form must be filled out completely for all able on new and recompleted wells.
_May 23, 1988	Fill out only Sections I. H. III, and VI for changes of ow
(Date)	If I dol only sections 1, 11, 111, and of for change of conditions are number of condi-

t only Sections I. II. III, and VI for changes of owr r number, or transporter, or other such change of condit:

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