

NO. OF COPIES DESTROYED		
DISTRIBUTION		1
MANTA FE		
FILE		
1333		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
OPERATION OFFICE		

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

P. O. Box 1290, Farmington, New Mexico 87499

New Well  
Recompletion  
Change in Ownership

**Chlorinated Gas**

XX Condensate

RECEIVED  
APR 26 1985  
OIL CON. DIV.  
DIST. 3

Well No.	Pool Name, including Formation	Kind of Lease	Federal	Lease No.
2-A	Blanco Mesaverde	State, Federal or Free	SF	080517

Section \_\_\_\_\_

Unit Letter D : 880 Feet From The North Line and 900 Feet From The West


Line of Section 21 Township 32N Range 10W , NMPM, San Juan County

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>					Address (Give address to which approved copy of this form is to be sent)	
Conoco, Inc. Surface Transportation					P. O. Box 1429, Bloomfield, N.M. 87413	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>					Address (Give address to which approved copy of this form is to be sent)	
Southern Union Gathering Company					P. O. Box 26400, Albuquerque, N.M. 87125	
Well produces oil or liquids, give location of tanks.	Unit D	Sec. 21	Twp. 32N	Rgs. 10W	Is gas actually connected? Yes	When

\_\_\_\_\_ this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

## CERTIFICATE OF COMPLIANCE

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.

  
Kenneth E. Roddy (Signature)  
Area Production Superintendent

4/26/85

Title

(Date)

OIL CONSERVATION DIVISION

**APPROVED** \_\_\_\_\_, 19\_\_\_\_

BY Charles Holston

TITLE DEPUTY CHIEF OF GAS INSPECTION, DIST. #3

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

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

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 multiple completed wells.