## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

| (                |     | 1 |  |
|------------------|-----|---|--|
| DISTRIBUTION     |     |   |  |
| SANTA PE         |     |   |  |
| FILE             |     |   |  |
| U.S.G.A.         |     |   |  |
| LAND OFFICE      |     |   |  |
| TRANSPORTER      | OIL |   |  |
|                  | GAS |   |  |
| 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 Page 1

Separate Forms C-104 must be filed for each pool in multip!

RECLIEST FOR ALLOWARIE

| OPERATOR   | A ALLOHADEL  |  |  |
|--|--|--|--|
| T PROBATION OFFICE 1   | AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS   |  |  |
| 1.   |  |  |  |
| Operator   |  |  |  |
| Northwest Pipeline Corporation   | •  |  |  |
| Address  |  |  |  |
| P.O. Box 90, Farmington, New Mexico 87499  |  |  |  |
| Reason(s) for filing (Check proper box)  | Other (Please explain)   |  |  |
| New Weil Change in Transporter of:   | IN   |  |  |
| Recompletion Oil Dry   | y Gas 100 to 100 |  |  |
| Change in Ownership Casinghead Gas   | ridensate FEB 0.1 1935   |  |  |
|  |  |  |  |
| If change of ownership give name   | OIL CO. I. DIV.  |  |  |
| and address of previous owner  | <del>Dist. 3</del>   |  |  |
| II. DESCRIPTION OF WELL AND LEASE  |  |  |  |
| Lease Name   Well No.   Pool Name, Including Fo  | ormation Frt Kind of Lease No.   |  |  |
| San Juan 32-7 Unit 72 So.Los Pinos Pi  | · 1  |  |  |
| Location   | ctured crists know Now 31 078343   |  |  |
|  | 020  |  |  |
| Unit Letter H : 1480 Feet From The North Line  | and 830 Feet From The East   |  |  |
| Line of Section 33 Township 32N Range  | 7W NMPM San Juan County  |  |  |
| Line of Section 33 Township 34N Range  | 7W , NMPM, San Juan County   |  |  |
| HI DESIGNATION OF TRANSPORTER OF OUR AND NATIONAL  |  |  |  |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL  Name of Authorized Transporter of Oil or Condensate (X)  | Address (Give address to which approved copy of this form is to be sent)   |  |  |
| UPG, Inc.  |  |  |  |
| UPG, Inc.  P.O. Box 66, Liberal, Kansas 67901  Image of Authorized Transporter of Casinghead Gas or Dry Gas [XX   Address (Give address to which approved copy of this form is to be sent) |  |  |  |
|  |  |  |  |
| Northwest Pipeline Corporation P.O. Box 90, Farmington, New Mexico 8749  |  |  |  |
| If well produces oil or liquids,   |  |  |  |
| give location of tanks. H 33 32N 7W  |  |  |  |
| If this production is commingled with that from any other lease or pool, a   | give commingling order number:   |  |  |
| NOTE: Complete Parts IV and V on reverse side if mesoscom  |  |  |  |
| NOTE: Complete Parts IV and V on reverse side if necessary.  |  |  |  |
| VI. CERTIFICATE OF COMPLIANCE  | OIL CONSERVATION DIVISION  |  |  |
| TI. CERTIFICATE OF COMMISSION  | FEB 01 1985  |  |  |
| I hereby certify that the rules and regulations of the Oil Conservation Division have  | APPROVED   |  |  |
| been complied with and that the information given is true and complete to the best of my knowledge and belief.   | $\mathcal{L}_{m}$  |  |  |
| ()   | BY Shanks way  |  |  |
|  | TITLE SUPERVISOR DISTRICT # 3  |  |  |
| A / C - M  |  |  |  |
| This form is to be filed in compliance with RULE 1104  If this is a request for allowable for a newly drilled or   |  |  |  |
| If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the devi   |  |  |  |
| Linda S. Marques (Signature) / well, this form must be accompanied by a tabulation of the de tests taken on the well in accordance with RULE 111.  |  |  |  |
| (Title)  | All sections of this form must be filled out completely for allow  |  |  |
| January 31, 1985   |  |  |  |
| (Decel   | Fill out only Sections I. II. III, and VI for changes of owne  |  |  |

completed wells.