## STATE OF NEW MEXICO PARTMENT

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SANTA FE		T	T
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U.1.0.3.			1
LAND OFFICE			
TRANSPORTER	OIL		
	BAB	1	1
OPERATOR			
PROBATION OFFICE			
I.			
Operator			
Northwes	t P	ipe	l i

## OIL CONSERVATION DIVISION P. O. BOX 2088

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

U.S.G.S.	SANTA FE, NEV	W MEXICO 87501	
LAND OFFICE		·	_
TRANSPORTER OIL	•		•
OPERATOR GAS	REQUEST FO	R ALLOWABLE	
PROBATION OFFICE	<b>A</b>	ND .	•
7	AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS	
Cperator			
	- Composition		
Northwest Pipelin	e corporation		·
P.O. Box 90 - Far	mington, New Mexico 87499		
Resson(s) for tiling (Check prop		Other (Please explain)	
New Yell	Change in Transporter of:		
Recompletion		y Gas	
		1	
Change in Ownership	Casinghead Gas X Co	ondensate	
If change of ownership give n and address of previous owne			
II. DESCRIPTION OF WELL	I AND LEASE		
Lease Name	Well No.   Pool Name, Including F	ormation   Kind of Lease	Jic. Ind. Locate No
Jicarilla 92	15 Blanco Mesa V	erde 关究, Federal ox	**XX Contract #92
Location			
Unit Letter N :_	1080 Feet From The South Lin	e and 1390 Feet From The	West
Line of Section 30	Township 27N Range	3W , NMPM. Rio Arr	iba County
III. DESIGNATION OF TR	ANSPORTER OF OIL AND NATURAL	. GAS	
Name of Authorized Transporter		Address (Give address to which approved	copy of this form is to be sent)
Four-Four Inc.		P.O. Box 821 - Farmingt	on, NM 87499
Name of Authorized Transporter	of Castnanead Gas or Dry Gas (	Address (Give address to which approved	
Northwest Pipelin		P.O. Box 90 - Farmingto	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rgs. N 30 27N 3W	Is gas actually connected? When	
If this production is commind	ed 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 COM	PLIANCE	OIL CONSERVATIO	N DIVISION  JUN 1 () 1006
	egulations of the Gir Conservation Division have ormation given is trustand complete to the best of	APPROVED STALL	19 19
my knowledge and belief.	Will then B transmit formblere to the pest of	BY	Xave /
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3 ./	My Son	TITLE DISTRIC	T # 8

Production & Drilling Cle

(Title) May 27, 1986

(Date)

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

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 allo able on new and recompleted wells.

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

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