## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			1
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FILE		$\top$	_
U.S.G.S.		T-	-
LAND OFFICE		1	-
TRANSPORTER	OIL		
	DAS		
OPERATOR			
PAGRATION OFFICE			

## OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND

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

All sections of this form must be filled out completely for allow

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

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

able on new and recompleted wells.

completed wells.

ALITHOPIZATION TO TRANS	PORT OIL AND NATURAL GAS			
1.	PORT OIL AND NATURAL GAS			
Operator Discharge Communication				
Northwest Pipeline Corporation				
P.O. Box 90, Farmington, New Mexico 87499				
Reeson(s) for filing (Check proper box)	Other (Please fingin)			
New Well Change in Transporter of:				
Recompletion Oil Dry Gas				
Change in Ownership Casinghead Gas X C	condensate JAN 0 9 1385			
If change of ownership give name	OIL CON. DIV.			
and address of previous owner				
	DIS1. 3			
II. DESCRIPTION OF WELL AND LEASE				
Indian I Well No. Pool Name, Including F				
	rde XXXXFoderal XXXX Jic Ind Cont.			
Location				
Unit Letter D : 980 Feet From The North Lin	we and 900 Feet From The West			
Line of Section 27 Township 28N Range	3W , NMPM, Rio Arriba County			
	·			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	L GAS			
Name of Authorized Transporter of Oil or Condensate	Address (Give address to which approved copy of this form is to be sent)			
UPG, Inc. P.O. Box 66, Liberal, Kansas 67901				
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)			
Northwest Pipeline Corporation	P.O. Box 90, Farmington, New Mexico 87499			
If well produces oil or liquids, Unit Sec. Twp. Rge.	Is gas actually connected? When			
give location of tanks. D 127 28N 3W				
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.				
M CERTIFICATE OF COMPHANCE	OIL CONSERVATION DIVISION			
VI. CERTIFICATE OF COMPLIANCE				
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED IAN 9 1985			
been complied with and that the information given is true and complete to the best of				
my knowledge and belief.	BY			
<u></u>	TITLE SUPERVISOR DISTRICT # 3			
$\mathcal{L}$	11165			
Tenda V. Majus R	This form is to be filed in compliance with RULE 1104.			
Signatural Signatural	If this is a request for allowable for a newly drilled or deepens			
Linda S. Marques (Signature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
Production and Drilling Clerk	A STATE OF THE PARTY OF THE PAR			

<u>January 4, 1985</u>

(Title)

(Date)