DETRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS OPERATOR	REQUEST	CONSTRUCTION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL	Form C-104 Supersedes tild C-108 and C-1 Effective 1-1-65
Northwest Pipelii	Corporation	ragaing diplomatik pangatikan sampun ana ara-te-fer diplomatik manamili mata diplomatik samb	rajamentari di rafte di andrete errompianta no ngiringan y nagaraga ay a paragamay a papanana
Address 501 Airport Driv. Reason(s) for filing (Check proper bas New Well Recompletion Change in Ownershir X	Change in Transporter of: Oil Dry C Casinghead Gas Cond	Gos Cher (Please explain) Gos Cher (Please explain)	
If change of ownership give name and address of previous owner	El Paso Natural Gas Comp	any, PO Box 990, Farming	ton, New Mexico 87401
DESCRIPTION OF WELL AND Lease Name Blanco	LEASE Veil No. Pool Hame, Including 2 Blanco Mesa		
Unit Letter G : 150	Beet From The North L	ine and 1750 Feet From	The East
	waship 27N Range	9N , NMFM, San J	uan County
. DESIGNATION OF TRANSPOR None of Authorized Transport of Co Northwest Pipeline Co Name of Authorized Transporter of Co El Paso Natural Gas C	rnoration singherd Gos or Dry Gos X	Address (Give address to which appr	rmington, New Mexico 8740
If well produces oil or liquids, give location of tarks.	Unit Sec. Twp. Ege. G 12 27N 9N	Is gas actually connected? W	then
If this production is commingled w	ith that from any other lease or pool		
Designate Type of Completi	on - (X)	New Well Workover Deepen	Plug Back Same Newly, Diff. Resta
Date Spudded	Date Compl. Ready to Frod.	Total Depth	P.B.T.D.
Elevations (DF, REB, RT, GR, etc.,	Name of Producing Formation	Top Gil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	TUBING, CASING, A	ND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CERENT
		H ^a	
V. TEST DATA AND REQUEST IN OIL WELL Date First New Oil Run To Tanks	OR ALLOWABLE (Test must be able for this	after recovery of total volume of load o depth or be for full 24 hours) Producing Method (Flour pump, eas	il and must be equal to crexceed top allo
Length of Test	Tubing Pressure	Casing Pressure	Chorto Sizo
Actual Pred. During Test	Oil-Bbia.	Water-Bble.	Gas-MOF
		OIL	ch./
GAS WFLL		Bble, Condensate/MMCF	Gravity of Condensute
Actual Prod. Test-MOF/D	Length of Test		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-ia)	Casing Piessure (Shut-in)	Choke Size

A. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with end that the information given above is true and complete to the best of my knowledge and belief.

 (Signature)	
(Title)	
 (Date)	

OIL CONSERVATION COMMISSION

3 APPROVED ...

Original Signed by A. R. Kendrick

FETHOLESS . MGIMEAN DISE TITLE _

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

If this is a request for allowable for a newly drilled or despended well, this form must be accompenied by a tabulation of the deviation tosts taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allow-able 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 routing completed wells.