## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION				
SANTA PE				
FILE				
U.B.G.A,				
LAND OFFICE				
TRAHEPORTER	OIL			
	GAS			
OPERATOR				
PROBATION OFFICE				

P. O. BOX 2088 SANTA FE, NEW MEXICO 87501 Form C-104 Revised 10-01-78 Format 06-01-83

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

REQUEST FOR ALLOWABLE

OPERATOR	ANI	D	•	·	
PROBATION OFFICE	AUTHORIZATION TO TRANSPO	ORT OIL AND NATU	RAL GAS		
I.					
Operator	•				
Northwest Pipeline Corpo	oration				
Address				a garage	
P.O. Box 90, Farmington	, New Mexico 87499			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
Reeson(s) for filing (Check proper box)		Other (Please	explain)		
New Well	Change in Transporter of:				
Recompletion	OII	Gas		1084	
Change in Ownership	Casinghead Gas X Con	densate	JAN 31	1300	
		<del> </del>	, ,24. N.	- 131V	
If change of ownership give name					
and address of previous owner			n/51	. 3	
	P. CD		0,0		
II. DESCRIPTION OF WELL AND I	Well No.   Pool Name, Including For	rmation	Kind of Lease	Lease No.	
Lease Name	41 Blanco Mesa Ve		KSKXX, Federal XX X XX	SF 078284	
San Juan 29-6 Unit	141   Blatte Hesa ve	i uc	toror and		
Location		000	Γ <sub>2.0.+</sub>	•	
Unit Letter B : 990	Feet From The North Line	and 990	Feet From The East		
		CU	. Rio Arriba	County	
Line of Section 24 Towns	nip 29N Range	6W , NMPN	, KIU ATTIDA	County	
		•			
III. DESIGNATION OF TRANSPO	TER OF OIL AND NATURAL	GAS	to which approved copy of this f	orm is to be sent!	
Name of Authorized Transporter of Oil or Condensate (A)  Name of Authorized Transporter of Oil or Condensate (A)  P.O. Box 66, Liberal, Kansas 67901					
UPG, Inc.		P.U. BOX 66,	Liberal, Kansas 0/3	orm is to be sent!	
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 Corp	oration	P.O. Box 90,	Farmington, New Mex	100 8/499	
	nit Sec. Twp. Rge.	Is gas actually connec	ed? When		
give location of tanks.	B				
If this production is commingled with that from any other lease or pool, give commingling order number:					
NOTE: Complete Parts IV and V of	n reverse side if necessary.				
		וו חוו מ	CONSERVATION DIVISION	าท	
VI. CERTIFICATE OF COMPLIANO	Œ		INN	31 198 <b>5</b>	
I hereby certify that the rules and regulations	of the Oil Conservation Division have	APPROVED	JAN	19	
been complied with and that the information	given is true and complete to the best of	/ · · · · · · · · · · · · · · · · · · ·			
my knowledge and belief.	•	BY	500 6	<del>/                                    </del>	
$\tilde{A}$	,			way	
	!	TITLE	SUPERVISOR D		
This form is to be filed in compliance with RULE 1104.					
MM(CO) Margallo If this is a request for allowable for a newly drilled or dee			ly drilled or deepene		
Linda S. Marques (Signature) well, this form must be accompanied by a tabulation of the Gardiner				lation of the deviatic	
Production and Drillin	g Clerk	All sections of this form must be filled out completely for allow			
(Title)		All sections of able on new and r	ecompleted wells.	completely to: allot	
lanuary 24 1985					
(Date)	well name or numb	er, or transporter, or other suc	h change of conditio:		