STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

| | - | | |
|------------------|-----|---|--|
| DISTRIBUTION | | T | |
| SANTA PE | | | |
| FILE | | | |
| U.S.G.S; | | | |
| LAND OFFICE | | | |
| TRANSPORTER | OIL | | |
| | GAR | | |
| 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

well name or number, or transporter, or other such change of condition.

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GA

| PROBATION OFFICE | | |
|--|--|--|
| I. AUTHORIZATION TO TRANSF | PORT OIL AND NATURAL GAS | |
| Operator . | | |
| Northwest Pipeline Corporation | · Similar | |
| Address | | |
| P.O. Box 90, Farmington, New Mexico 87499 | | |
| Reeson(s) for filing (Check proper box) | Other (Please expiety) | |
| New Well Change in Transporter of: | VGas JAN2 1 1885 | |
| Recompletion OII Dr | y Gas | |
| Change in Ownership Casinghead Gas | indensate (| |
| If change of ownership give name and address of previous owner | OIL DIST. 3 | |
| II. DESCRIPTION OF WELL AND LEASE | | |
| Lease Name Well No. Pool Name, including Fo | 1 3333 | |
| San Juan 29-6 Unit 2 Blanco Mesa Ve | rde Str. Federal ox Fix SF 078278 | |
| Location | , | |
| Unit Letter M : 990 Feet From The South Lin | e and 990 Feet From The West | |
| 14 | | |
| Line of Section 14 Township 29N Hange | 6W , NMPM, Rio Arriba County | |
| W. Droyou and an extensive and an extens | | |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL | 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 (A | 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, give location of tanks. M 14 29N 6W | , and action, connected, | |
| <u></u> | <u> </u> | |
| 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. | | |
| | 1 | |
| VI. CERTIFICATE OF COMPLIANCE | OIL CONSERVATION DIVISION | |
| I hereby comify short the rules and remulations of the Oil Consequation Division have | 1AN 3:101985 | |
| hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED | | |
| my knowledge and belief. | BY Stanks. James | |
| | 011050110000 010701 | |
| | TITLE SUPERVISOR DISTRIBIT # 3 | |
| Kinda & Margues 7 | This form is to be filed in compliance with RULE 1104. | |
| John John John John John John John John | If this is a request for allowable for a newly drilled or deepens | |
| Lillua 3. Marques | Marques (Signature) well, this form must be accompanied by a tabulation of the deviation and Devil in a Clork tests taken on the well in accordance with RULE 111. | |
| Production and Drilling Clerk | All sections of this form must be filled out completely for allow | |
| (Title) | able on new and recompleted wells. | |
| January 15, 1985 | Fill out only Sections I. II. III. and VI for changes of owner | |
| (Daie) | I well name or number, or transporter or other such change of condition | |