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

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION		T
SANTA FE		
FILE		
U.S.O.E.		
LANG OFFICE		
TRANSPORTER	OIL	
	GAS	
OPENATOR		
PROMATION OFFICE		

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Revised 10-01-78 Formal 06-01-83

REQUEST FOR ALLOWABLE	
AND	
AUTHORIZATION TO TRANSPORT OIL AND NATURAL	GA.

PROMATION OFFICE AUTHORIZATION TO TRANSPO	OF OH AND NATURAL CAS
I.	DRI OIL AND HATOKAL GAS
Operator	
Northwest Pipeline Corporation	
Address	
3539 E. 30th - Farmington, NM 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	
Recompletion Oil Dry	Gas
Change in Ownership Casinghead Gas	densate
If change of ownership give name and address of previous owner	
II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Fo.	rmation Kind of Lease Lease No.
1 50	CE 070426
San oddi 23-0 onte Branco nesa	verde
Location U 1000 North	810 Fast
Unit Letter H : 1800 Feet From The North Line	and Feet From The
Line of Section 18 Township 29N Range	6W NMPM Rio Arriba County
Line of Section TO township 2311 Honge	OH , INDIVIDUAL TO THE PARTY OF
III, DESIGNATION OF TRANSPORTER OF OIL AND NATURAL Name of Authorized Transporter of Oil or Condensate XX Gary Energy Corporation Name of Authorized Transporter of Casinghead Gas or Dry Gas XX Northwest Pipeline Corporation EPG	GAS Address (Give address to which approved copy of this form is to be sent) P.O. Box 159 - Bloomfield, NM 87413 Address (Give address to which approved copy of this form is to be sent) 3539 E. 30th - Farmington, NM 87401
Linu Sec Two Ree.	Is gas actually connected? When
If well produces oil or liquids, H 18 29N 6W	
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.	·
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.	BYSrank
	TITLE SUPERVISOR DISTRICT BE
	This form is to be filled in compliance with RULE 1104.
(Signature)	If this is a request for silowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
Production & Drilling Clerk	All sections of this form must be filled out completely for allow-
(Title)	able on new and recompleted wells.
June 2, 1988	Fill out only Sections I. H. III, and VI for changes of owner,
(Date)	well name or number, or transporter, or other such change of condition.

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