STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

	41740	\top	
DISTRIBUTION			1
SANTA FE		1	
FILE			1
U.S.G.B.			
LANG OFFICE			
TRANSPORTER	OIL		
	GAS	Ī	
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

REQUEST FOR ALLOWABLE

OPERATOR A	ND
PROBATION DESIGN	PORT OIL AND NATURAL GAS
I.	
↓ ^	
Northwest Pipeline Corporation	
P.O. Box 90 - Farmington, New Mexico 87499	
Resson(s) for filing (Check proper box)	Other (Please expiain)
New Well Change in Transporter of:	
	ry Gaa
Change in Ownership Casinghead Gas Ca	ondensate
If change of ownership give name	
and address of previous owner	
II. DESCRIPTION OF WELL AND LEASE	
Lease Name Well No. Pool Name, Including Fo	
San Juan 29-6 Unit 8Y Blanco Mesa	Verde Stax, Foderal StaxXX NM 012698
Location	
Unit Letter L : 1460 Feet From The South Lin	e and 800 Feet From The West
Line of Section] Township 29N Range	6W . NMPM. Rio Arriba County
Line of Section Township 29N Hange	OW KIO AITIDA
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS
Name of Authorized Transporter of Oli or Condensate	Address (Give address to which approved copy of this form is to be sent)
Four-Four Inc.	P.O. Box 821 - Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Castinghead Gas or Dry Gas X	
Northwest Pipeline Corporation	P.O. Box 90 - Farmington, NM 87499
If well produces oil or liquids, Unit Sec. Twp. Rge.	is day definitify connected.
give location of tanks. ! L ! 1 ! 29N ! 6W	
If this production is commingled with that from any other lease or pool,	give comminging order number:
NOTE: Complete Parts IV and V on reverse side if necessary.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISI JUN 1 0 198
I hereby certify that the rules and regulaters of the Of Conterfitting Division have been complied with and that the information given is true and complete up he part of	APPROVED . 19, 19
my knowledge and belief.	BY
been complied with and that the information given is true and complete the best of my knowledge and belief. OIL CON 101986 And C Hamas 187. DIV 3	MERKUSOR DISTRICT = 1
	TITLE
COLICE CIMONOPIONI DIL	This form is to be filed in compliance with RULE 1104.
Cientinal Signatural	If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviati
Production & Drilling Clerk	tests taken on the well in accordance with RULE 111.
(Title)	All sections of this form must be filled out completely for allo able on new and recompleted wells.
May 29, 1986	able on new and recompleted wells.

Fill out only Sections I. II. III., and VI for changes of owns well name or number, or transporter, or other such change of condition

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