STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			T
BANTA FE		Γ	
FILE		1	
V.8.G.8.			
LANG OFFICE			
TRANSPORTER	OIL		
	GAS		
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

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

REQUEST FOR ALLOWABLE			
	ND		
AUTHORIZATION TO TRANSI	PORT OIL AND NATURAL GAS		
1. Operator			
Northwest Pipeline Corporation			
	1		
Resson(s) for filing (Check proper box)	Other (Please expiain)		
New Well Change in Transporter of:	ry Gas		
	ondensate		
Change in Ownership Casinghead Gas	Jindia dia		
If change of ownership give name			
and address of previous owner			
w promission or will late that			
II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including F	ormation Xind of Lease Lague No.		
San Juan 29-6 Unit 56A Blanco Mesa V	, and 02477 A		
Location	Cruc		
	1550 Wast		
Unit Letter C : 930 Feet From The North Lin	e and 1550 Feet From The West		
Line of Section 33 Township 29N Range	6W , NMPM. Rio Arriba County		
Line of Section 33 Township 29N Aange	OW , NAMEN, INTO ATTITUDE COUNTY		
III DESIGNATION OF TRANSPORTER OF OIL AND MATTIRAL	CAS		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	Address (Give address to which approved copy of this form is to be sent)		
	P.O. Box 821 - Farmington, NM 87499		
Four-Four Inc. Name of Authorized Transporter of Casinghead Gas or Dry Gas Y	Address (Give address to which approved copy of this form is to be sent)		
	P.O. Box 90 - Farmington, NM 87499		
Northwest Pipeline Corporation Unit Sec. Twp. Rge.	Is gas actually connected? When		
If well produces oil or liquids,			
	<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.			
	CH CONCERNATION BUILDING		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION 1 0 1986		
1 handa and factor of Comments Physician base	APPROVED		
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.	BY		
	SUPERVISOR DISTRICT		
	TITLE		
This form is to be filed in compliance with RULE 1104.			
If this is a request for allowable for a newly drilled or de			
(Signature) well, this form must be accompanied by a tabulation of the devia tests taken on the well in accordance with RULE 111.			
Production & Drilling Clerk	All sections of this form must be filled out completely for allo-		
(Title)	able on new and recompleted wells.		
June 3, 1986 Fill out only Sections I. II. III, and VI for changes of or			
(Date)	well name or number, or transporter, or other such change of condition		