STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT **. ** 1***** ******* ----P. O. BOX 2088 FILE SANTA FE, NEW MEXICO 87501 U.S.Q.A. LAND OFFICE TAAMSPORTER ... REQUEST FOR ALLOWABLE OPERATOR AND PROSATION OF AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Northwest Pipeline Corporation Accres 87499 P.O. Box 90 - Farmington, New Mexico Ressous) for tiling (Check proper box) Other (Please espiain) New Well Change in Transporter of: Recompletion OII Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Well No. | Pool Name, Including Formation Kind of Lease Lease No San Juan 29-6 Unit Blanco Mesa Verde Syrtex Federal ox Kyex NM 03471 Location 820 Feet From The South 1730 Line and 29N Rio Arriba 6W Line of Section Township County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil or Condensate (A) P.O. Drawer 1320 - Farmington, NM Mancos Corporation Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Cosingneed Gas or Dry Gas ix Northwest Pipeline Corporation P.O. Box 90 - Farmington, New Mexico , When Unii Sec. Twp. Rae. Is gas actually connected? If well produces all or liquids 28 29N : 6W give location of tanks. 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. OIL CONSERVATION DIVISION VI. CERTIFICATE OF COMPLIANCE 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 3 3 TITLE_ This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepen-

Carrie Harmon

<u>January 15, 1986</u>

Production & Drilling Clerk

(Date)

well, this form must be accompanied by a tabulation of the deviati

All sections of this form must be filled out completely for allo-

Fill out only Sections I. II. III, and VI for changes of owne

all name or number, or transporter, or other such change of condition Separate Forms C-104 must be filled for each pool in multip

tests taken on the well in accordance with MULE 111.

able on new and recompleted wells.

completed wells.