## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Title)

(Date)

May 29, 1986

DG. 80 (00149 OCCI1049					
DISTRIBUTE	T	1			
SANTA PE		1			
FILE	ī	_			
U.S.G.A.		1			
LAMO OFFICE					
TRANSPORTER	OIL	T			
	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

TRANSPORTER	OIL					•			
	GAS	$\exists$	REQUEST FOR ALLOWABLE						
PROBATION OFF			• .	•		AND		•	•
7		<del></del>	AUTHOR	RIZATION '	TO TRAN	SPORT OIL A	UTAN DI	RAL GAS	
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		Farmingto	on, New	riexico	8749	<del></del>	401		
Resson(s) for fi	ling (Check	proper dox)	<b>~</b> .			Oir	ier (Please	expiain)	
New Well				n Transporte		<b>.</b>			
Recompletion			H °"		<u> </u>	Dry Gaz			
Change in C	Deveraulb			nghead Gas	ٔ لگا ٔ	Condensate			
If change of ow and address of			<del></del> :						
II. DESCRIPTI	ION OF W	TI AND I	FASP						
Lease Name	1011 01 11	<u> </u>		Pool Name	, including	Formation		Kind of Lease	Legse N
San Jua	an 29-6	Unit	9A	Blance	o Mesa	Verde		State, XXXXXXXXXXX	E-289-
Location			<del></del>	<u> </u>		<del></del>			
Unit Letter_	E	:1460	_Feet Fro	m The NO	rth_t	ine and 80	0	Feet From The West	· · · · · · · · · · · · · · · · · · ·
Line of Section	ion 36	Townshi	<b>.</b> 29	N	Range	6W	, NMPM	. Rio Arriba	Count
III. DESIGNA	TION OF	TRANSPOR	TER OF		NATTIRA	T CAS			
Name of Authors				ondensate [		Asaress /Give	address t	o which approved copy of this for	m is to be sent)
Four-Fo	our Inc.			•		P.O.	Box 82	1 - Farmington, NM	87499
Name of Authors		rier of Casingh	ead Gas	or Dry	Gas [X]			o which approved copy of this for	m is to be sent/
Northwe	est Pine	line Corp	noratio	n n		Pn	Rox 90	- Farmington, NM	87499
<del></del>		i I in i			Rge.	ls gas actuail			
If well produces give location of				6 29	. •			i	
If this production	on is commi	<u> </u>	<del> </del>			, give comming	ling order	number:	
	_								<del></del>
NOTE: Comp	piete Parts	IV and V on	reverse s	ide if nece	ssary.				
VI. CERTIFICA	ATE OF CO		•				OIL C	ONSERVATION DIVISION	J
	-		-					177	
I hereby certify the	at the rules ar	id regulation o	the POG					Sill sur	11019
been complied with my knowledge and	h and that the I belief	intorm <b>ilités</b> giv	SH refther H	d amplete t	o the best of	11		was . Sava	- 5 1000
in, mismage zia		•			1	BY		AND PARTY OF THE P	
			UN,	45	//)	TITLE_	(	SUPERWIND DISTRICT	
1	- /	/ <b>O</b> // .	~ <i>4 U</i>	1986	IUI .			SUPERMEDE DISTRICT &	
- Oan	Luox	aim	ODA,	~U 4	了不	11		be filed in compliance with I	
Produc	tion & D	rilling (	Strka	DIV.		well, this	orm must	est for allowable for a newly be accompanied by a tabulat well in accordance with RUL!	ion of the deviat
		_	~	-		- 1			

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