STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

May 30, 1986

(T			
DISTRIBUTION					
SANTA PE					
FILE					
U.8.G.3.					
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

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.

TRAMEPORTER GAS		REQUEST FO		SLE		
PROMATION OFFICE	AUTHODIZAT	a ION TO TRANS	ND BODTOUA	ND NATHE	AL GAS	
I.	AUTHURIZAT	IUN IU IRANS	PORT OIL A	U4D 14A1 UN		
Cperator						
Northwest Pipeline Cor	rporation				•	
Address	por a cross					
P.O. Box 90 - Farmingt	ton. New Mex	cico 87499	9			
Reasons for filing (Check proper box)	son, were were			ther (Please	expiain)	
New Well	Change in Tran	sporter of:	1			
Recompletion	Cii		ry Gan			
Change in Ownership	Casinghea	d Gas X	ondensate			
CAMALE III COLLEGE						
If change of ownership give name and address of previous owner		·	· · · ·			
II. DESCRIPTION OF WELL AND	LEASE					
Lease Name	Well No. Pool	Name, Including F			Kind of Lease	NM 012698
San Juan 29-6 Unit	32A B1	anco Mesa \	/erde		类效义。Federal 文文文文	11111 012090
Location			_			
Unit Letter F : 1560	Feet From The	. North L	ne and	490	_ Feet From The Wes	it .
Line of Section Towns	•hip 29N	Range	6W	, NMPM.	Rio Arriba	Coun
III. DESIGNATION OF TRANSPO	RTER OF OIL	AND NATURA	L GAS			
Name of Authorized Transporter of Cil	or Conden		Address (Gi	ve address t	o which approved copy of th	iis form is to be sent)
Four-Four Inc.			P.O.	Box 821	- Farmington, NM	<u>1 87499 </u>
Name of Authorized Transporter of Casin	ignead Gas 📗 c	or Dry Gas 📉	Address (Gi	ve address t	o which approved copy of th	is form is to be sent)
Northwest Pipeline Co			P.O.	Box 90 -	- Farmington, NM	87499
		Twp. Rge.		ily connecte		
If well produces oil or liquids, give location of tanks.	F 11	29N 6W		· · · · · · · · · · · · · · · · · · ·		
If this production is commingled with	that from any oth	er lease or pool,	, give commin	igling order	number:	
NOTE: Complete Parts IV and V						
VI. CERTIFICATE OF COMPLLAN	GE (OIL C	DNSERVATION DIVI	SIGNAL 1 0 19
the second secon	A STATE OF THE STA	arian Division have	APPROV		170	19
I hereby certify that the rules and regularing been complied with and that the information	given is true and con	mplete so the est of		274	mar. Java	
my knowledge and belief.	dir.	* 😉 // /)	BY		X_	
	JUNIDIO	<i>IU</i> /	1}		VI.	
r /Oi	JUN 1 0 198	6	TITLE_		SUPERVISOR DISTRICT	
	- CON ~	· P	This	form is to	be filed in compliance	គឺរសិ RULE 1104.
Lilly Hou	L CON. D	N D	7 1000	ia ia a recu	est for allowable for a	newly drilled or deep
Signatu	(1)		Il walt this	form must	be accompanied by a ta	abulation of the devis
Production & Drilling	Clerk				vell in accordance with this form must be filled	
(Title)	,		able on n	sew and rec	completed wells.	