## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			$\overline{}$
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U.S.G.4.		1	
LANG OFFICE		$T^{-}$	1
TRANSPORTER	DIL		
	BAB	Ι.	
OPERATOR			
PROMATION 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.

TRANSPORTER DIL	·		•	-
OPERATOR SAB	REQUEST FOR ALLOWABLE			
PROMATION OFFICE		AND	•	•
I.	AUTHORIZATION TO TRAN	ISPORT OIL AND NAT	URAL GAS	
Operator			······································	<del></del>
Northwest Pipel	ine Corporation			
Address				
	armington, New Mexico 8749	9		
Resson(s) for filing (Check pro	per box)	Other (Plea	se explain)	
New Well	Change in Transporter of:			
Recompletion		Dry Gas		
Change in Ownership	Casinghead Gas X	Condensate		
If change of ownership give and address of previous own				
II. DESCRIPTION OF WE	LL AND LEASE			
Lease Name	Well No. Pool Name, Including	Formation	Kind of Lease	Lease No
San Juan 29-6 Ur	nit   42A   Blanco Mesa	Verde	MAXXFederal &XXX	NM 012671
Location				
Unit Letter J;	1490 Feet From The South L	ine and <u>850</u>	Feet From The East	<u> </u>
Line of Section 25	Township 29N Range	6W . NMP1	. Dio Amerika	
Line of Section 25	Township 29N Range	DW , NMPI	u. Rio Arriba	County
III. DESIGNATION OF T	RANSPORTER OF OIL AND NATURA	I CAS		
Name of Authorized Transports	or of Cil or Condensate		to which approved copy of this	form is to be sent)
Four-Four Inc.		P 0 Roy 821	- Farmington, New M	Movico 97/100
Name of Authorized Transporter	r of Casinghead Gas or Dry Gas X	Address (Give address	to which approved copy of this	form is to be sent;
Northwest Pipeli	ine Corporation	P.O. Box 90 -	Farmington, New Me	exico 87499
*** ***	Unit Sec. Twp. Rgs.	Is gas actually connec		=X1C0 07433
If well produces oil or liquids, give location of tanks.	J 25 29N 6W		i	•
If this production is comming	ied with that from any other lease or pool,	. give commingling orde	er number:	· · · · · · · · · · · · · · · · · · ·
NOTE: Complete Parts IV	and V on reverse side if necessary.			
UT CERTIFICATE OF CO.	CONT. A N.C.F.	l	CONSERVATION DIVISI	ON!
VI. CERTIFICATE OF COM	IPLIANCE			11N 1 0 1006
hereby certify that the rules and	regulations of the Oll Conservation Defice have	APPROVED_	170	19 1300
been complied with and that the in my knowledge and belief.	formation given is true and complete to the least of		rank !	آه <u>ي</u>
by knowledge and benef.	JUN 1 Dies	BY	SHIPEDWAR	17 e
		TITLE	SUPERVISOR DISTRICT #	1 1
/i	OIL CON. DIE			
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7	(Signature)		uset for allowable for a new t be accompanied by a tabu	
Production & Dri			well in accordance with Ru	
	(Title)		this form must be filled out	completely for allo
June 2, 1986	·	able on new and re	. •	los changes of au-
	(Date)		Sections I. II. III, and VI I r. or transporter, or other suc	