

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
JUN 08 1984

Operator Jack A. Cole		OIL CON. DIV. DIST. 3
Address P. O. Box 191, Farmington, New Mexico 87499		
Reason(s) for filing (Check proper box) <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership		Other (Please explain) Complete new interval in Gallup Formation Change in pool name
Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas		<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Chacon Amigos	Well No. 101	Pool Name, including Formation West Lindrith Gallup - Dakota	Kind of Lease Jicarilla	Lease No. 358
Location Unit Letter <u>L</u> : <u>1850'</u> Feet From The <u>South</u> Line and <u>790'</u> Feet From The <u>West</u> Line of Section <u>7</u> Township <u>22N</u> Range <u>2W</u> , NMPM, <u>Sandoval</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 489, Bloomfield, New Mexico 87413					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, New Mexico 87499					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 7	Twp. 22N	Rge. 2W	Is gas actually connected? No	When

If this production is commingled with that from any other lease or pool, give commingling order number: R-7495

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

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.

Douglas Blumett
(Signature)
Production Superintendent
(Title)
June 6, 1984
(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 08 1984, 19
BY Original Signed by CHARLES CHOLSON
TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened
well, this form must be accompanied by a tabulation of the deviation
tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allow-
able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner,
well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply
completed wells.