STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

_			_
	~10_		
DISTRIBUTION			
SANTA FE			
PILE			L
V.8.0.4.			
LAND OFFICE		1	
TRANSPORTER	OIL	<u> </u>	<u> </u>
	BAS	1	<u> </u>
OPERATOR			L
PROBATION OFFICE			1

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

Form C-104 Revised 10-01-78 Format 06-01-83

REQUEST FOR ALLOWABLE AND

ERATOR AND MATURAL GAS			
PROBATION OFFICE AUTHORIZATION TO TRANSPOR	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
ARCO Oil & Gas Company, A Division of Atlantic R	Richfield Company		
ARCO Oil & Gas Company, A Division of Actuation			
1816 E. Mojave, Farmington, New Mexico 87401			
1816 E. Mojave, Farmington, new text	Other (Please explain)		
Reeson(s) for filing (Check proper box) Change in Transporter of:	s turnamentam offective		
Mem Aeii DiA C	Dry Gas Change of transporter effective		
Recompletion Change in Ownership Condition Condition Casinghead Gas Condition	ensate 5/1/87		
Change in Owner strip			
If change of ownership give name			
and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Form	Kind of Lease No.		
II. DESCRIPTION OF WELL AND LEASE West No. Pool Name, Including Form Lease Name 1 West Lindrith G.	slove, Federal or Fee Federal \$F080472A		
Chacon Federal 1 West Lindrich G	arrup bakesa		
Fact			
Unit Letter P: 800 Feet From The South Line	GNO		
3W	NMPM. Rio Arriba County		
Line of Section 30 Township 24N Range 3W			
Tropic porter of CII A	7227 No. 16th St. Phoenix, Arizona 85020 Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, New Mexico 87401 Is gas actually connected? Yes 19/7/78		
Production Supervisor April 27, 1987 (Doing)	TITLE 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 allowable on new and recompleted wells. Fill out only Sections I. II. and VI for changes of owner well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filled for each pool in multiply completed wells.		