## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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SAMPA PE			<del>†</del>	-
FILE		1	1	-
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LANG OFFICE				-
TRANSPORTER	OIL			_
	BAD			
OPERATOR				1
PROBATION OF	14C E		_	1

## 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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL

I. AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL GAS			
Operator				
Amoco Production Company				
501 Airport Drive Farmington, NM 87401 Rescon(s) for filing (Check proper box)	DECENTERA			
1 A W-11	Other (Please ex int)			
Remarketion Committee of:	un la			
Change in Ownership	Condensere JAN 0 3 1985			
If change of ownership give name				
and address of previous owner				
II. DESCRIPTION OF WELL AND LEASE				
"	Legae No.			
Vicarilla Contract 146 176 Basin Dakota	State, Federal or Fee Federal Vic Cont			
Unit Letter J: 1660 Feet From The South Line and 1660 Feet From The Gast				
1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				
Cine at Section Township 25 N Range	SW , NMPM. Rio Arriba County			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	I CAS			
or Condensate	Address (Give address to which approved copy of this form is to be sent)			
Permian Corp. Permian (St. 9/1/87)	P. U. Box 1702 Farmington, NM 87499			
Name of Authorized Transporter of Casinghead Gas or Cry Gas	Address (Give address to which approved copy of this form is to be sent)			
Northwest Pipeline Corporation	P. U. Box 90 Farmington, NM 87401			
If well produces oil or liquids, Unit Sec. Twp. Rgs.  que location of lanks.  Unit Sec. Twp. Rgs.	Is que actually connected? When			
If this production is commingled with that from any other lease or pool,	Tive Commingling order number			
NOTE: Complete Parts IV and V on reverse side if necessary.	g.v. Committging order number:			
VI. CERTIFICATE OF COMPLIANCE	1			
<del></del>	OIL CONSERVATION DIVISION			
I 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	APPROVED JAN 3,1985			
my knowledge and belief.	BY			
	TITLESUPERVISOR DISTRICT # 3			
(SI) hau	This form is to be filed in compliance with AULE 1104.			
(Signature)	If this is a request for allowable for a service of the			
Admin. Supervisor	tests taken on the well in accordance with RULE 111,			
1-2-85	All sections of this form must be filled out completely for silose able on new and recompleted wells.			
(Date)	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.			
<b>i</b> ∤	Second Fame C tot			

Separate Forms C-104 must be filed for each pool in multiply completed wells.