STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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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

| OPERATOR REQUEST FOR ALLOWABLE | | | | |
|---|--|--|--|--|
| AUTHORIZATION TO | AND | | | |
| Constant | TRANSPORT OIL AND NATURAL GADECEIVEN | | | |
| | N S O E I V E | | | |
| Amoco Production Company | ען עו | | | |
| | JAN22 1985 | | | |
| 2501 Airport Drive Farmington, NM 87401 | | | | |
| M = 1 m = 1 | Other (Please explain) OIL CON. DIV. | | | |
| Change in Fransporter of: | DIST. 3 | | | |
| Change in Ownership | Dry Gas | | | |
| Casingheed Gas | Condensate | | | |
| If change of ownership give name and address of previous owner | | | | |
| II. DESCRIPTION OF WELL AND LEASE | | | | |
| Lette Name Letter Name Letter | sting Formation | | | |
| Jicarilla Contract 146 37 Blanco | 7112 | | | |
| i | | | | |
| Unit Letter_ C : 1070 Feet From The March | | | | |
| Unit Letter C: 1070 Feet From The North Line and 1750 Feet From The West | | | | |
| Line of Section 4 Township 25 N Rang | • SW , NAPA, Rio Arriba | | | |
| | RIO ATTIDA Caunty | | | |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | | | | |
| or Condensate IX | | | | |
| Permian Corp. Valenti S/ 1/67 | P. O. Box 1702 Farmington, NM 87499 | | | |
| Name of Authorized Transporter of Castinghead Gas or Dry Gas | Address (Give address to which approved copy of this form is to be sent) | | | |
| Northwest Pipeline Corporation | P. O. Box 90 Farmington, NM 87401 | | | |
| If well preduces oil or liquids. Unit Sec. Twp. Rq. | | | | |
| give location of ionza. C 4 25N 5 | 5W | | | |
| If this production is commingled with that from any other lease or pool, give commingling order number: | | | | |
| NOTE: Complete Part III | | | | |
| NOTE: Complete Parts IV and V on reverse side if necessary. | | | | |
| VI. CERTIFICATE OF COMPLIANCE | CII (COVID- | | | |
| | OIL CONSERVATION DIVISION | | | |
| I hereby certify that the rules and regulations of the Oil Conservation Division is | APPROVED 100 2 2,1985 | | | |
| been complied with and that the information given is true and complete to the being knowledge and belief. | st of | | | |
| , | BY One follows | | | |
| | TITLE SUPERVISOR DISTRICT # 3 | | | |
| $\langle \langle 1 \rangle \langle 1 \rangle$ | TITLE | | | |
| | This form is to be filed in compliance with RULE 1104. | | | |
| (Signature) | If this is a request for altomobile for | | | |
| Admin. Supervisor | well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. | | | |
| (Title) | All sections of this form must be fitted out complete. | | | |
| 1-2-85 | The state of the s | | | |
| (Date) | Fill out only Sections I. C. III, and VI for changes of owner, | | | |
| | () and an are pure at or other such change of company | | | |
| | Separate Forms C-104 must be filled for each pool in multiply completed wells. | | | |
| | | | | |