STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

Operations Analyst

September 3, 1986

(Tule)

DISTRIBUTION	
SANTA FE	
FILE	
V.1.0.A.	
LAND OFFICE	
TRAMSPORTER OIL	_
GAS	 _
OPERATOR	
PROBATION OFFICE	

OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Format 06-01-83 Page 1

Form C-104

Revised 10-01-78

TRANSPORTER OIL GAS	REQUEST FOR A		THE CONTRACT OF THE STATE OF TH		
OPERATOR OU AND NATURAL CASE					
PROBATION OFFICE AUTHORIZATIO	M TO TRACTS OF		101. 3 4.1		
l				1	
ARCO Oil & Gas Co., Division of	Atlantic Ri	chfield Co.		,	
Address					
P. O. Box 1610, Midland, Texas	79702				
Resson(s) for filing (Check proper box)		Other (Please	exp(din)		
	parter of:		c -odien		
Dry Gas (Fas Cannellica)					
Recompletion X Casinghead	Gas Cond	lensate .			
Change in Ownership					
A STATE OF THE COMPANY		•			
If change of ownership give name and address of previous owner					
THE REGLESS OF NAME OF THE PERSON OF T		,	_		
II. DESCRIPTION OF WELL AND LEASE	Name, Including Form	mation	Kind of Lease	Lease No.	
No. of the second secon			State, Federal or Fee Fee	Fee	
ARCO Leeson 1 W.	Lindrith-Ga]]up/Dakota			
		,	West		
1740	South Line	and 1800	Feet From The West		
Unit Letter K : 1740 Feet From The South Line and 1800 Feet From The West					
27 Township 25N	SEN Bone 3W NMPM, RIO Arriba County				
Line of Section 27 Township 25N Range 3N					
OF OU AND NATURAL GAS					
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Oil X or Condens	Permian Corp. Of Authorized Transporter of Oil X or Condensate P. O. Box 1072, Farmington, NM 87499 Permian Corp. Address (Give address to which approved copy of this form is to be sent)				
Demoin Comp					
Name of Authorized Transporter of Casinghead Gas X or Dry Gas P. O. Box 990, Farmington, NM 87401					
Figure Natural Gas Co. When					
Tinit , Sec.	1.00	l lung 18 1986			
If well produces oil or liquids, give location of tanks.	25N : 3W	Yes			
If this production is commingled with that from any oth	ar lease or pool. F	rive commingling orde	r number:		
If this production is commingled with that from any oth	C, 10200 0. F. 12				
NOTE: Complete Parts IV and V on reverse side i	f necessary.				
NOIE: Complete lans it and		OIL CONSERVATION DIVISION			
VI. CERTIFICATE OF COMPLIANCE		SFA 5, 1386 _			
VI. CERTIFICATE OF COM =====	Division have	ion have APPROVED			
been complied with and that the littorination gives	BY · · · · · · · · · · · · · · · · · · ·				
my knowledge and belief.		SUPERVISOR (DISTRICT 獨 3			
		TITLE			
	. 1	This form is t	to be filed in compliance with RU	LE 1104.	

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepens well, this form must be accompanied by a tabulation of the deviatio 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 multiple completed wells.