

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROBATION OFFICE	

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 GAS

I, Operator  
Amoco Production Company  
Address  
501 Airport Drive Farmington, NM 87401  
Reason(s) for filing (Check proper box)  
☐ New Well  
☐ Recompletion  
☐ Change in Ownership  
Change in Transporter of:  
☐ Oil  
☐ Casinghead Gas  
☒ Dry Gas  
☒ Condensate  
Other (Please explain) \_\_\_\_\_

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DIST. 3

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Ticariilla Apache 102 Well No. 10 Pool Name, including Formation Basin Dakota-B.S.Mesa Gallup Kind of Lease Federal Lease No. 09000102  
Location  
Unit Letter D : 890 Feet From The North Line and 1030 Feet From The West  
Line of Section 4 Township 26N Range 4W , NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒  
Permian Corp.  
Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 1702 Farmington, NM 87499  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒  
Northwest Pipeline Corporation  
Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 90 Farmington, NM 87401  
If well produces oil or liquids, give location of tanks. Unit D Sec. 4 Twp. 26N Rge. 4W  
Is gas actually connected? \_\_\_\_\_ When \_\_\_\_\_

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

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

VI. CERTIFICATE OF COMPLIANCE

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 my knowledge and belief.

BDS Shaw

(Signature)  
Admin. Supervisor

(Title)

1-2-85

(Date)

OIL CONSERVATION DIVISION

APPROVED

FEB 21 1985

BY

TITLE

SUPERVISOR DISTRICT # 3

This form is to be filled 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, 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 filled for each pool in multiply completed wells.