

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-104
Revised 10-01-78
Format 08-01-83
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NO. OF COPIES RECEIVED	
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SANTA FE	
FILE	
U.S.G.A.	
LA. O OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
SEP 21 1984
OIL CON. DIV. 1
DIST. 3

I. Operator
Amoco Production Company

Address
501 Airport Drive, Farmington, NM 87401

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas	Other (Please explain) Pool Name Change
<input type="checkbox"/> Recompletion		<input type="checkbox"/> Coninghead Gas	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership				

Change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Well Name Jicarilla Gas Com 155	Well No. A	Pool Name, including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee Federal	Lease No. Jicarilla
Location			Contract 155	
Unit Letter H	: 1800 Feet From The North Line and		850 Feet From The East	
Line of Section 32	Township 26N	Range 5W	, NMPM, Rio Arriba County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Plateau, Inc.	P.O. Box 489, Bloomfield, NM 87413
Name of Authorized Transporter of Coninghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Paso Natural Gas	P.O. Box 990, Farmington, NM 87401
Well produces oil or liquids, and location of tanks.	Is gas actually connected? When
Unit: H Sec.: 32 Twp.: 26N Rge.: 5@	No

If its 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.

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
Administrative Supervisor
(Signature)

9/19/84
(Date)

OIL CONSERVATION DIVISION
SEP 21 1984

APPROVED _____

BY **Frank J. [Signature]**
SUPERVISOR DISTRICT # 3

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, 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 multiply completed wells.