STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE		1-	_
TRANSPORTER	OIL		
	GAB	Π	
OPERATOR			
PROBATION OFFICE			

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Revised 10-01-78 Format 08-01-83 Page 1

Form C-104

REQUEST FOR ALLOWABLE AND

RECEIVED

1.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS JAN2 0 19	87 U
Operator		07
'0.T.H.G., Inc.	OIL CON. I	DIV
Address	DIST 7	218.
c/o A. R. Kendrick,	Box 516, Aztec, New Mexico 87401 (505) 334-2555	
Reeson(s) for filing (Check proper box)	Other (Please explain)	<u> </u>
New Well	Change in Transporter of: Gas from Amogo	
Recompletion	OII Dry Gas	
X Change in Ownership	X Casinghead Gas Condensate	
II. DESCRIPTION OF WELL AND DE	Amoco Production Company, Farmington, New Mexico 87401 LEASE Well No. Pool Name, Including Formation 19 Tocito Dome Pennsylvanian D SAX Forderal XXXX 14-20-60	Lease No.
Location	13 TOOLS SOME FORMS I VARIABLE TO THE TOOLS	77004
Unit Letter H ; 1830	Feet From The North Line and 610 Feet From The East	
Line of Section 15 Townsh	hip 26N Range 18W , NMPM, Sar Juan	County
IL. DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of OII	Or Condensate Address (Give address to which a record con addition	
The Permiss Core	or Condensate Address (Give address to which approved copy of this form is t	io be sent)

Box 1183, Houston, Texas 77251-1183 Name of Authorized Transporter of Casinghead Gas 📉 or Dry Gas 0.T.H.G., Inc. Box 312, Otis: Kansas 67565 Unii Sec. Rge. Twp. If well produces oil or liquids, give location of tanks. 26N : 18W Yes 5/14/74 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.

_AR	Signature (Signature)
Agent	
1/19	(Title)

OIL CONSERVATION DIVISION

APPROVED	
BY	Srank !
TITLE	SUPERVISOR DISTRICT # 3

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 taust 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.