STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Signature)

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Agent

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DISTRIBUTION			
SANTA FE			
FILE			
U.6.0.8.			
LAND OFFICE			
THANSPORTER	OIL		
	GAB		
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

THANSPORTER GAS OPERATOR PROBATION OFFICE	Al	R ALLOWABLE ND PORT OIL AND NATURAL GAS	V. Mar		
1	AUTHORIZATION TO TRANSF	PORT OIL AND NATURAL GAS			
Operator					
`0.T.H.G., Inc.					
Address	Day 516 Arton Now Mo	vice 87/01 (505) 534-2555			
c/o A. R. Kendrick,	BOX 316, AZTEC, New Me	xico 87401 (505) 334-2555			
Reason(s) for filing (Check proper box)	Change in Transporter of:	Gas from Amoco			
New Well Recompletion	□ aut				
X Change in Ownership	Casinghead Gas Co	ondensate			
If change of ownership give name and address of previous owner	Amoco Production Compa	ny, Farmington, New Mexico 87401			
II. DESCRIPTION OF WELL AND) IFASE				
Lease Name	Mett No. 1.001 lique, increating 1	1	Lease No.		
Navajo Tribal U	23 Tocito Dome P	ennsylvanian D SANK Foderal XXXX 14-20-0	30777074		
Location	2. 11	0470 Woot			
Unit Letter N : 745	Feet From The South Lin	e and 2130 Feet From The West			
Line of Section 22 Town	nahip 26N Range	18W , NMPM, San Juan	County		
THE DECLCARATION OF TRANSPO	OPTED OF OIL AND NATIRAL	GAS			
Name of Authorized Transporter of Oil	II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be so Address (Give address to which approved copy of this form is to be so				
The Permain Corp.		Box 1183, Houston, Texas 77251-118	83		
Name of Authorized Transporter of Cast	Name of Authorized Transporter of Casinghead Gas (or Dry Gas Address (Give address to which approved copy of this form is to be sent)				
O.T.H.G., Inc.		Box 312, Otis, Kansas 67565			
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Yes 5/29/74			
give location of tanks.	A 20: 26N: 18W	<u> </u>			
If this production is commingled with	a that from any other lease or pool,	give commingling order number: CTB-1	25		
NOTE: Complete Parts IV and V	on reverse side if necessary.				
VI. CERTIFICATE OF COMPLIAN	1CE	OIL CONSERVATION DIVISION	<u> </u>		
I hereby certify that the rules and regulation been complied with and that the information my knowledge and belief.	ns of the Oil Conservation Division have n given is true and complete to the best of	APPROVED BY	-X.6		
,			VISOR DISTRICT ¥ 3		
	, , , , , , , , , , , , , , , , , , ,	TITLE			
AR Kew	Socie	This form is to be flied in compliance with R If this is a request for sliowable for a newly			

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	3)200-	1	Ju-2	Mari es	V	
ВҮ	***		(UPERVISOR	DISTRICT 器 3	
TITLE					210111101 47. 2	

well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with NULE 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.