## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			_
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LANG OFFICE			
TRANSPORTER	air i		
	GAS		
GPERATOR			
PROSATION OF	V- #		_

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

Form C-104 Revised 10-01-73 Format 06-01-83 Rage 1

TREMSPORTER GAS	D.F.Ou.c.				
GPERATOR	REQUEST FOR ALLOWABLE AND				
PROMATION OFFICE	AUTHORIZATION TO TRAI		URAL GAS		
Operator	<del></del>				
Amoco Production Compan	у				
Address			<del> </del>		
501 Airport Drive Farm	ington, NM 87401				
Resson(s) for liling (Check proper box)		Other (Pleas	e explain)		
New Well Recompletion	Change in Transporter of:				
Change in Ownership	Company	Dry Gas			
Circle in Countries	Casinghead Gas	Condensate			
If change of ownership give name and address of previous owner					
II. DESCRIPTION OF WELL AND					
Lesse Name	Weil No. Pool Name, including		Kind of Lease	Lease No.	
W. D. Heath A	10 Basin Dakota	· · · · · · · · · · · · · · · · · · ·	State, Federal or Fee Jederal	SF 337	
1					
Unit Letter R : 1850	Feet From The South L	ine and	Feet From The West		
Line of Section 17 Townst	nip 29N Range	9ω , NMPM	. San Juan	County	
III. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURA	AL GAS			
Name of Authorized Transporter of Q11	or Candensate	Asacoss (Give address	to which approved copy of this form is to	o se sentj	
Permian Corp.	Fermion (ET. 9 / 1 /87)		2 Farmington, NM 87499		
Name of Authorized Transporter of Casings El Paso Natural Gas Comp		P. O. Box 990	Farmington, NM 87401	o se sent/	
if well produces oil or liquids, Que location of lanzs.	11 Sec. Twp. Rgs. K 17 29N 9W	is gas actually connecte	od 7 When		
If this production is commingled with the	set from any other lease or pool	Zive communating order	aumhae.		
		, give comminging order	numoer:		
NOTE: Complete Parts IV and V or	reverse side if necessary.			_	
VI. CERTIFICATE OF COMPLIANCE	Ē	OIL C	DNSERVATION NUSERVATER	5	
hereby certify that the rules and regulations of	f the Oil Conservation Division have	APPROVED	0//1 9/10	10	
been complied with and that the information given who will be seen that the information gives the second belief.	ven is true and complete to the best of	13 L	have The	· •	
1		BY	74 24 7		
$\bigcirc$ $\land$ $\bigcirc$ /		TITLE DEPU	iy Gil a bas has. Ichor, dish. #	خ	
$\langle \langle \rangle \rangle$	<del>-</del>	11	be filed in compliance with RULE		
(Signature)		If this is a requi	est for allowable for a sendu della	أستسا	
Admin. Superviso		tests taken on the w	be accompanied by a tabulation of self in accordance with AULE III.	the deviation	
1-2-85	En-	All sections of this form must be filled out completely for silonable on new and recompleted wells.			
<b>64</b> ,		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.			
<b>~</b> ***	Wo. The Market of the Market o	Separate Forms completed wells.	C-104 must be flied for each poo	il in multiply	
	~ 1985 M				