## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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FILE	
V.S.G.4.	
LANG OFFICE	
TRANSPORTER OIL	
SAS	
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 GA

I. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
Amoco Production Company	7			
Address				
501 Airport Drive Farmi	ngton, NM 87401		- 6 56 57	-
Resson(s) for filing (Check proper box)	Change in Taxanian (	Other (Plea	ne etblan) E G E	
Recompletion	Change in Transporter of:	bry Gas	DEG	
Change in Ownership		Condensate	M -JAN 22 1885	
If change of ownership give name			- 11 62 67	1.
and eddress of previous owner	· · · · · · · · · · · · · · · · · · ·		OIF 7	
II. DESCRIPTION OF WELL AND L				
Chavez Gas Com D	Well No. Pool Name, Including	ormation	Kind of Lease	Legse No.
Location D	I I E   Daden Danoea		State, Federal or Fee Fee	
Unit Letter J: 1560	Feet From The South Li	ne and <u>1760</u>	Feet From The <u>Cast</u>	
Line of Section 3 Townshi	p 29N Admos (	9ω , NM	m. San Juan	County
III. DESIGNATION OF TRANSPORT	TER OF OIL AND NATURA	L GAS		
Permian Corp. Permian (Eff.	or Condensate 🔀	Asarona (Give addres	s to which approved capy of this form t	
t		,	02 Farmington, NM 874	
Name of Authorized Transporter of Casinghi El Paso Natural Gas Comp		P. O. Box 99	o to which approved copy of this form to 0 Farmington, NM 874	
If well produces oil or liquids, Uni	Sec. Twp. Rgs.  J 3 29N 9W	is gas actually conne	cted? When	
If this production is commingled with the	at from any other lease or pool,	give commingling ord	er number:	····
NOTE: Complete Parts IV and V on				<del></del>
VI. CERTIFICATE OF COMPLIANCE		OIL.	CONSERVATION DIVISION	•
I hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED				
been complied with and that the information given is true and complete to the best of my knowledge and belief.				
DEPUTY OIL & GAS INSPECTOR, DIST. #3			·#3	
This form is to be filed in compliance with RULE 1104.				
(Signature) Admin. Superviso:	i wass, one last of secondanied by a tabulation of the deviation			
(Tille) 1-2-85		All sections of this form must be filled out completely for silomable on new and recompleted wells.		
(Date)		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 Form	s C-104 must be filed for each	pool in multiply