STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

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OPERATOR		\vdash	1-	4
PROBATION OFFICE				

OIL CONSERVATION DIVISION P. O. BOX 2088

Form C-104 Perised 10-01-78 Format 06-01-83 Page 1

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE

PROBATION OFFICE	AND			
I. AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL GAR			
Operated				
Amoco Production Company	Want All All All All All All All All All Al			
501 Airport Drive Farmington, NM 87401	JAN22 1335			
Name Wall	Other (Please explain)			
Change in Transporter of:				
Change in Ownership Casinghead Cas	Ory Gas DIST			
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL AND LEASE				
Well No. Pool None Leaf, tr				
Totah Vista Gas Com Basin Dakot	a State, Federal or Fee Fee			
Unit Lotter M . 940				
Unit Letter M: 940 Feet From The South Line and 790 Feet From The West				
Line of Section 22 Township 29 N Range	134 NAPR San Juan			
III. DESIGNATION OF TRANSPORTED OF CO.	Causey			
M. DESIGNATION OF TRANSPORTER OF OIL AND NATUR	AL GAS			
Permian Corp. Permian (Eff. 9/1/87)	P. O. Box 1702 Farmington, NM 87499			
El Paso Natural Gas Company	Address (Give address to which approved cary of this forming			
If well produces all ar liquids, Unit Sec. Two. 'Rgs.	P. O. Box ggg Farmington, NM 87401			
give location of lanks. M 122 29N 130				
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	OIL CONSERVATION DIVISION			
i necessity that the rules and regularizes of the OU.C.				
been complied with and that the information given is true and complete to the best of my knowledge and belief.				
1	BY holson			
$R \cap C $	TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3			
This form is to be filed in compilence with RULE 1104.				
Disastruct				
Admin. Supervisor	tests taken on the well in accordance with RULI 111.			
1-2-85	All sections of this form must be filled out completely for sliow- able 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 Changes of owner.			
l l	Separate Forms C-104 must be filed for each pool in multiply completed wells.			
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