STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

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TRAMEPORTER	916	1	†	_
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OPERATOR		_	╈	_
PROBATION OF		_	1	-

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 CAS

I. AUTHORIZATION TO TRA	UNSPORT OIL AND NATURAL GAS				
Amoco Production Company	Bac				
501 Airport Drive Farmington NM 07401	RECEIPT				
New Well Change in Transporter of:	Other (Please explain) JAN22 1383				
Change in Ownership Casinghood Gas	Candennate OIL C				
If change of ownership give name and address of previous owner	DIST.				
II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including					
Location Basin Dakota	State, Federal or Fee Flourn Qummi				
Unit Letter 0: 1190 Feet From The South Line and 1490 Feet From The Cast					
Line of Section 22 Township 29N Range /3W NMPK Son June					
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	IL GAS				
Permian Corp. Permian Corp. Address (Give address to which approved copy of this form to be sent) P. O. Box 1702 Farmington, NM 87499					
El-Paso Natural Gas Company	P. O. Box 990 Farmington, NM 87401				
give location of tanks. O 22 29N:13W					
this production is commingled with that from any other lease or pool, give commingling order numbers					
NOTE: Complete Parts IV and V on reverse side if necessary. 1. CERTIFICATE OF COMPLIANCE	1				
hereby certify that the rules and regulations of the OV. C.					
y knowledge and belief. APPROVED Reales APPROVED Rankes APPROVED Rankes					
RNS	TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3				
Admin. Supervisor	This form is to be filed in compliance with RULE 1104. If this is a request for silowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tasts taken on the well in accordance with RULE 111.				
1-2-85	All sections of this form must be filled out completely for allowable 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.				
il	Separate Forms C-104 must be filled for each pool in multiply completed wells.				