STATE OF NEW MEXICO ENERGY AND MINERALS GEPARTMENT

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LAHD OFFICE		1	
TRANSPORTER	014		
	GAB		
OPERATOR			
PROBATION OFF	~ E	;	_

OIL CONSERVATION DIVISION P 0. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 05-01-83 Rage 1

GPERATOR GAS	REQUEST F	OR ALLOWABLE			
Coording	AUTHORIZATION TO TRAN	ISPORT OIL AND HAT	URAL GAS		
Amoco Production Company					
, Address		· · · · · · · · · · · · · · · · · · ·			
	ngton, NM 87401				
Reason(s) for Isling (Check proper box)		Ciher (Pleas	e explain,		
New Yell	Change in Transporter of:				
Change in Ownership		Dry Gas			
Cumda III Causa sulb	Casinghead Gas	Condensate			
If change of ownership give name and address of previous owner					
II. DESCRIPTION OF WELL AND LE	ASE				
Hare Gas Com B	Well No. Pool Name, Including /E Basin Dakota	Formation	Kind of Lease	Legse No.	
Location	76 Justin Baketa		State, Federal or Fee Fee		
Unit Letter <u>E</u> : 1060	Feet From The West LI	ne and/500	_ Feet From The North		
Line of Section 23 Township	29N Range	11W , NMPM	. San Juan	Caunty	
M. DESIGNATION OF TRANSPORT	ER OF OIL AND NATURA	L GAS			
Permian Corp. Permien (Eff.		P. O. Box 1702	o watch approved copy of this form in 2 Farmington, NM 874	s to be sent;	
Name of Authorized Transporter of Casinghed		Address (Give address t	o which approved copy of this form is		
El Paso Natural Gas Compa	ny Sec. Twp. Rge.	r. U. Box 990	Farmington, NM 8740	01	
if well produces oil or liquids, unit give location of lanks.	23 29N 11W	is gas actually connecte	d? When		
If this production is commingled with that		give commingling order	number:		
NOTE: Complete Parts IV and V on r	everse side if necessary.				
VI. CERTIFICATE OF COMPLIANCE		סוג כנ	DNSERVATION DIVISION	•	
Deen complied with and that the information given is true and complete to the harve					
been compiled with and that the information given my knowledge and belief.	is true and complete to the best of	7	11/10		
1		97	arles []		
PNC		TITLE DEPU	TY OIL & GAS INSPECTOR, DIST.	#3	
DDShaw		This form is to	be filed in compliance with aut	£ 1104.	
(Signature) If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviation of the devia				led or deepened	
total da the well in accordance with AULE 111.				11.	
(Title)		All sections of the shie on new and reco	his form must be filled out completed wells.	etely for ellow	
(D) Falling	Ro -	Fill gut only Sections I II IV and IV for the			
Maga		The manne of manners,	or transporter or other such chan- C-104 must be filed for each p	ET of condition.	
JAN 03 18	985 U				
OIL CON.			were a second	-	
DIST, 3	UIV.				
2101, 3					