

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

|                           |     |
|---------------------------|-----|
| CO. OR COMMODITY RECEIVED |     |
| DISTRIBUTION              |     |
| SANTA FE                  |     |
| FILE                      |     |
| U.S.G.A.                  |     |
| LAND OFFICE               |     |
| TRANSPORTER               | OIL |
|                           | GAS |
| OPERATOR                  |     |
| PRODUCTION 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 GAS

I. Operator  
Amoco Production Company  
Address  
501 Airport Drive Farmington, NM 87401

Reason(s) for filing (Check proper box)  
☐ New Well  
☐ Recompletion  
☐ Change in Ownership  
 Change in Transporter of:  
☐ Oil  
☐ Casingshead Gas  
☒ Dry Gas  
☒ Condensate  
 Other (Please explain) \_\_\_\_\_

If change of ownership give name and address of previous owner \_\_\_\_\_

**RECEIVED**  
FEB 15 1985  
OIL CON. DIV.  
DIST. 3

II. DESCRIPTION OF WELL AND LEASE

Lease Name E. E. Elliott "B" Well No. 13 Pool Name, including Formation Blanco Pictured Cliffs Kind of Lease Federal Lease No. SF 078139

Location  
Unit Letter B : 1113 Feet From The North Line and 1453 Feet From The East  
Line of Section 34 Township 30 N Range 9 W , NMPL: San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|                                                                                                                           |                                                                          |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>          | Address (Give address to which approved copy of this form is to be sent) |
| <u>Permian Corp. Permian (Eff. 9/1/87)</u>                                                                                | <u>P. O. Box 1702 Farmington, NM 87499</u>                               |
| Name of Authorized Transporter of Casingshead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| <u>El Paso Natural Gas Company</u>                                                                                        | <u>P. O. Box 990 Farmington, NM 87401</u>                                |
| If well produces oil or liquids, give location of tanks.                                                                  | Is gas actually connected? When                                          |
| Unit Sec. Twp. Rge.                                                                                                       |                                                                          |

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

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

B. D. Shaw  
(Signature)  
Admin. Supervisor  
(Title)  
1-2-85  
(Date)

OIL CONSERVATION DIVISION  
APPROVED FEB 15 1985  
BY Frank J. Shaw  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
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 Forms C-104 must be filled for each pool in multiply completed wells.