

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

Form C-104
Revised 10/01/79
Format 06/01/83
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NO. OF SECTORS REQUESTED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.D.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Amoco Production Co.

Address
501 Airport Drive, Farmington, N M 87401

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gashead Gas	Other (Please explain) <u>JUL 22 1985</u> OIL CON. DIV. DIST. 3
<input type="checkbox"/> Recompletion		
<input type="checkbox"/> Change in Ownership		
<input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> Condensate		

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Well Name <u>Fred Phillips C</u>	Well No. <u>3</u>	Pool Name, including Formation <u>Blanco Mesaverde</u>	Kind of Lease State, Federal or Fee Federal	Lease No. <u>NM-01138</u>
Location Unit Letter <u>E</u> : <u>1650</u> Feet From The <u>North</u> Line and <u>910</u> Feet From The <u>West</u>				
Line of Section <u>15</u> Township <u>25N</u> Range <u>3W</u> , NMPM, <u>Rio Arriba</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

One of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1702 Farmington, NM 87499</u>
One of Authorized Transporter of Gashead Gas <input checked="" type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 990 Farmington, NM 87499</u>
Well produces oil or liquids, no location of tanks.	Unit Sec. Twp. Rge. <u>E 15 25N 3W</u>
Is gas actually connected?	When <u>No</u>

If production is commingled with that from any other lease or pool, give commingling order number: R-7651

NOTE: Complete Parts IV and V on reverse side if necessary.

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.

DD Lawson
(Signature)
District Admin Supervisor
(Title)
7-17-85
(Date)

OIL CONSERVATION DIVISION
JUL 22 1985
APPROVED _____
BY Frank J. [Signature]
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 filed for each pool in multiply completed wells.