

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 06-01-83
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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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JAN 20 1987
OIL CON. DIV
DTS

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	O.T.H.G., Inc.	
Address	(505) 334-2555 c/o A. R. Kendrick, Box 516, Aztec, New Mexico 87401	
Reason(s) for filing (Check proper box)	Change in Transporter oil:	Other (Please explain)
<input type="checkbox"/> New Well	<input type="checkbox"/> Oil	Gas from Amoco
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner: Amoco Production Company, Farmington, New Mexico

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Navajo Tribal N	6	Tocito Dome Pennsylvanian D	State, Federal XXXX	14-20-60-5035
Location	Unit Letter <u>G</u> : <u>2130</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u>			
Line of Section	Township	Range	County	
<u>17</u>	<u>26N</u>	<u>18W</u>	NMPM, San Juan	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
The Permian Corp.	Box 1183-Houston, Texas 77251-1183					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
O.T.H.G., Inc.	Box 312, Otis, Kansas 67565					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Req.	Is gas actually connected?	When
	<u>A</u>	<u>20</u>	<u>26N</u>	<u>18W</u>	Yes	

If this production is commingled with that from any other lease or pool, give commingling order number: CTB-123

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.

AR Kendrick
(Signature)
Agent
(Title)
1/19/87
(Date)

OIL CONSERVATION DIVISION

APPROVED Franklin JAN 20 1987
BY _____
SUPERVISOR DISTRICT 2/3
TITLE _____

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.