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TRANSPORTER	OIL 2 GAS
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator AMOCO PRODUCTION COMPANY	
Address 501 Airport Drive, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Four Corners Pipeline Co. will continue to run as much oil as possible and Plateau, Inc., will take surplus on spot sales basis.
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of Oil <input type="checkbox"/>	
Change in Transporter of Gas <input checked="" type="checkbox"/>	
Change in Transporter of Gas <input type="checkbox"/>	

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo Tribal "N"	Well No. Pool Name, including Honoraria 12 Tocito Dome Penn. "D"	Kind of Lease State, Federal or Fee Federal	Lease No. 14-20-603-5035
Location			
Unit Letter I	Year 1980	East from The South	Line and 580
Line of Section 17	Township 26-N	Range 18-W	County 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"/> Four Corners Pipeline Company Plateau, Inc. (Spot Sales)	Address (Give address to which approved copy of this form is to be sent) Box 1588, Farmington, New Mexico 87401
Name of Authorized Transporter of Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Box 108, Farmington, New Mexico 87401
If well produces oil or liquids, give location of tanks.	Unit A
	Sec. 20
	Twp. 26N
	Range 18W
	Is production commingled? Yes
	When 9-20-73

If this production is commingled with that from any other lease or pool, give well logging well number

CTE-123

IV. COMPLETION DATA

Designate Type of Completion - ()	Oil Well	Gas Well	Refr. Well	Water Well	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.				P.B.T.D.		
Elevations (DF, RKB, RT, GK, etc.)	Name of Producing Formation				Tubing Depth		
Perforations					Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after a period of 24 hours volume of production must be equal to or exceed top allowable for this depth or be in full 24 hours.)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Blow-Down (MCF/D)	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

GL Hamilton
(Signature)
Area Administrative Supervisor
(Title)
March 20, 1974
(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAR 20 1974**, 19
Original Signed by **Emery C. Arnold**
SUPERVISOR DIST. #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