

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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| LAND OFFICE | |
| TRANSPORTER | <input type="checkbox"/> OIL <input type="checkbox"/> GAS |
| OPERATOR | |
| PROMOTION 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)

| | | |
|--|--|------------------------|
| <input type="checkbox"/> New Well | Change in Transporter of: | Other (Please explain) |
| <input type="checkbox"/> Recompletion | <input type="checkbox"/> Oil | |
| <input type="checkbox"/> Change in Ownership | <input type="checkbox"/> Gashead Gas | |
| | <input checked="" type="checkbox"/> Dry Gas | |
| | <input checked="" type="checkbox"/> Condensate | |

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

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|-----------------------|---|--|------------------------------|
| Lease Name Shane Gas Com | Well No. 1A | Pool Name, including Formation Blanco Mesaverde | Kind of Lease State, Federal or Free Federal | Lease No. SFO78132 |
| Location Unit Letter N : 830 Feet From The South Line and 1870 Feet From The West Line of Section 14 Township 29N Range 9W . 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"/> Permian Corp. Permian (Eff. 9/1/87) | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1702 Farmington, NM 87499 |
| Name of Authorized Transporter of Gashead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> EI-Paso Natural Gas Company | Address (Give address to which approved copy of this form is to be sent) P. O. Box 990 Farmington, NM 87401 |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. N 14 29N 9W |
| Is gas actually connected? _____ When _____ | |

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

BY

TITLE

DEPUTY OIL & GAS INSPECTOR, 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 filled for each pool in multiply completed wells.