## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

90. 90 100:10 011	****	
DISTRIBUTI	OH	
BANTA FE		
FILE		
V.1.0.1,		
LAND OFFICE		
TRANSPORTER	OIL	
	GAB	
<b>BPERATOR</b>		
PROBATION OFF	KE	

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

Form C-104 Revised 10-01-78 Formet 06-01-83 Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

ł,				
Amoco Production Co.	10 1385 Carrent			
Kédross				
501 Airport Drive, Farmington, N	M 87401			
Reason(s) for filing (Check proper box)	Other (Please explain)			
New Well Change in Transporter of:				
	ry Gas			
Change in Ownership Casinghead Gas C	ondensate			
to change of ownership give name and address of previous owner				
L DESCRIPTION OF WELL AND LEASE				
Cease Name Well No. Pool Name, including E Cedar Hill	ormation   Kind of Lease   Lease No.			
Sammons Gas Com I I Basal Coal	State, Federal or Fee Fee			
Location				
Unit Letter B 945 Feet From The North Line and 1580 Feet From The East				
211	101			
Line of Section 6 Township 31N Range	10W , NMPM, San Juan County			
U. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	CAS			
Tame of Authorized Transporter of CII or Condensate X	Address (Give address to which approved copy of this form is to be sent)			
Permian Corporation				
Riggs of Authorized Transporter of Casinghead Gas or Dry Gaz X	P.O. Box 1702 Farmington, NM 87499  Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Company	P.O. Boy 990 Farmington NM 97/00			
The Sec Two Bee	P.O. Box 990 Farmington, NM 87499			
Well produces oil or liquids.  B 6 31N 10W	No			
fighte 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.				
CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION				
IIIN 1 A 100E				
hereby certify that the rules and regulations of the Oil Conservation Division have	NE PROVED			
een complied with and that the information given is true and complete to the best of ay knowledge and belief.	Original Signed by CHARLES GHOLSON			
,				
	TITLE DEPUTY CIL & GAS INSPECTOR, DIST. #3			
If this is a request for allowable for a newly drilled or deepe				
(Signature)   well, this form must be accompanied by a tabulation of the deviation				
Adm. Supervisor tests taken on the well in accordance with MULE 111.				
(Title) All sections of this form must be filled out completely for all able on new and recompleted wells.				
Fill out only Sections I, II, III, and VI for changes of o				
(Date) well name or number, or transporter, or other such change of cond Separate Forms C-104 must be filed for each pool in mu				
Separate Forms C-104 must be filed for each pool in multi				