



STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	☒
PRODUCTION OFFICE	☒

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

Form C-104
Revised 10-01-78
Format OG-01-33
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
AMOCO PRODUCTION COMPANY

Address
P.O. BOX 68 HOBBS, NEW MEXICO 88240

Reason(s) for filing (Check proper box)

☐ New Well	Change in Transporter of:	Other (Please explain) Change Gas Purchaser
☐ Recompletion	☐ Oil	
☐ Change in Ownership	☐ Casinghead Gas	
	☒ Dry Gas	
	☐ Condensate	

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Smith Federal	Well No. 1	Pool Name, including Formation Indian Basin Upper Penn	Kind of Lease State, Federal or Fee Federal	Lease No. NM-025109
Location Unit Letter F, 1650 Feet From The North Line and 1650 Feet From The West	Line of Section 11	Township 22	Range 23	N.M.P.M., Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ 36 Petroleum Corp	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1182, Houston, TX 77201
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Marathon Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 552 Midland, Texas 79702
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.
Is gas actually connected?	When
Yes	3-10-87

If this production is commingled with that from any other lease or pool, give commingling order number: N/A

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.

[Signature]
(Signature)
3/17/87
(Date)

OIL CONSERVATION DIVISION
APPROVED **MAR 20 1987**
BY **Original Signed By**
Les A. Clements
TITLE **Supervisor District II**

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 logs 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.