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STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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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

Operator <u>Amoco Production Company</u>	
Address <u>P.O. Box 68, Hobbs, NM 88240</u>	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well	<u>Testing allowable for 447 bbls. to clear tanks</u> <u>3815-4141 Delaware</u>
<input type="checkbox"/> Recompletion	
<input type="checkbox"/> Change in Ownership	
<input type="checkbox"/> Change in Transporter of:	
<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>State II</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Sulphate Draw Delaware</u>	Kind of Lease State, Federal or Fee <u>State</u>	Lease No. <u>L-4683</u>
Location				
Unit Letter <u>J</u>	<u>1880</u>	Feet From The <u>South</u>	Line and <u>1980</u>	Feet From The <u>East</u>
Line of Section <u>20</u>	Township <u>24-S</u>	Range <u>27-E</u>	, NMPL, <u>Eddy</u> County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>The Permian Corporation</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1183, Houston TX 77001</u>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	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.

Bonita Coble
Administrative Analyst
12-13-84 (Date)

verbal approval received 12-13-84
Les Clements to Bonita Coble

OIL CONSERVATION DIVISION	
DEC 28 1984	
APPROVED	19
BY	Original Signed By
	Leslie 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 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.

2+5-NMOCB, A
-JRB Hou Rm 21-156
-FJN Hou Rm 4-206
-GCC
-Theresa
1-HNG
1-Permian