STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	[1460	
DISTRIBUTION		
SANTA PE		_
FILE		_
U.\$.0.8.		_
LAND OFFICE		_
TRANSPORTER	OIL,	
	g as	
OPERATOR		
PRORATION 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



Separate Forms C-104 must be filed for each pool in multiply

OPERATOR	A	ND	A DE WEST	
PROBATION OFFICE	AUTHORIZATION TO TRANS	PORT OIL AND NATU	RAL GAS	
Operator			Service of the service of	30 C .
American Exploration	Company		MON O	
Address				
	enter, Houston, Texas			
Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please	e explain)	
Recompletion		ry Gas	·	
X Change in Ownership		ondensate		
		ation, 8700 Tes	soro Drive, San Antoni	o, Texas 78
II. DESCRIPTION OF WELL AND	EASE Weil No. Pool Name, Including F	Ormalion	Kind of Lease	
Santa Fe Railroad	50 Hospah Lower S		State, Federal or Fee Fee	Legae No.
Location	modean nower b	Joann Baria	ree	
Unit Letter E : 1980	Feet From The North	100	Feet From The West	
Line of Section 7 Towns	nip 17N Aange	8W , NMPM	• McKinlev	County
		<u> </u>	, reminey	County
III. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL	. GAS		
Name of Authorized Transporter of Oil	or Condensate		to which approved copy of this form is	
Ciniza Pipeline			, Bloomfield, N.M. 874	
Name of Authorized Transporter of Casing	nead Gas ar Dry Gas	Address (Give dadress	o which approved copy of this form is	; to be sent;
: [{ well produces oil or liquids,	D 7 17N 8W	Is das actually connecte	ed? When	
If this production is commingled with t	hat from any other lease or pool,	give commingling order	number:	
NOTE: Complete Parts IV and V o	e rangera cida if nacarram			
NOTE. Complete land it and it	n reverse sime if necessary.	1.1		
VI. CERTIFICATE OF COMPLIANC		OIL C	SEP 09 1988	
I hereby certify that the rules and regulations been complied with and that the information g		APPROVED		., 19
my knowledge and belief.	ven is true and complete to the best of	By Bin	1) Chan	
		Cupen	Widiou prodbiom # P	
\cap		TITLE SUPER	VISION DISTRICT # 3	
	-	This form is to	be filed in compliance with Rui	E 1104.
Signature Production Administ		well, this form must	est for allowable for a newly dri be accompanied by a tabulation well in accordance with NULE 1	of the deviation
(Title)			this form must be filled out comp	
August 22, 1988		Fill out only 9	ections I. II. III, and VI for the	inged of owner,
156147),	mant usus ot unupar	, or transporter, or other such char	ige of condition.