

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	
OIL	
NATURAL GAS	
OPERATOR	
PRODUCTION 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

RECEIVED
SEP 21 1984

Operator Amoco Production Company

Address 501 Airport Drive, Farmington, New Mexico 87401

OIL CON. DIV. DIST. 3

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Condensate Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	Other (Please explain) <u>Pool Name Change</u>
<input type="checkbox"/> Recompletion		
<input type="checkbox"/> Change in Ownership		

Change of ownership give name & address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Well Name <u>Jicarilla Contract 155</u>	Well No. <u>24</u>	Pool Name, including Formation <u>Blanco Mesaverde</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>Jicarilla Contract 155</u>
Unit Letter <u>M</u>	<u>940</u>	Feet From The <u>West</u> Line and <u>790</u>	Feet From The <u>South</u>	
Line of Section <u>31</u>	Township <u>26N</u>	Range <u>5W</u>	NMPM, <u>Rio Arriba</u> County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> <u>Plateau, Inc.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 489, Bloomfield, NM 87413</u>
Name of Authorized Transporter of Condensate Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <u>Northwest Pipeline</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 90, Farmington, NM 87401</u>
Well produces oil or liquids, location of tanks. Unit <u>M</u> Sec. <u>3</u> Twp. <u>26N</u> Rge. <u>5W</u>	Is gas actually connected? _____ When _____

If 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

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.

BDS shaw

(Signature)

Administrative Supervisor

(Title)

9/19/84

(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 21 1984 IS _____

BY Frank J. Shaw

TITLE SUPERVISOR DISTRICT # 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 Form C-104 must be filed for each pool in multiply completed wells.