

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF TOPICS RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.A.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROMOTION 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

I. Operator  
Amoco Production Company  
Address  
501 Airport Drive Farmington, NM 87401

Reason(s) for filing (Check proper box)  
☐ New Well  
☐ Recompletion  
☐ Change in Ownership  
 Change in Transporter of:  
☐ Oil  
☐ Casinghead Gas  
☒ Dry Gas  
☒ Condensate  
 Other (Please explain)  
**RECEIVED**  
 JAN 03 1985

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla Apache 102 Well No. 13R Pool Name, including Formation Basin Dakota Kind of Lease State, Federal or Fee Federal Lease No. JA 102

Location  
Unit Letter H : 1520 Feet From The North Line and 800 Feet From The East  
Line of Section 10 Township 26N Range 4W , NMPM, Rio Arriba County \_\_\_\_\_

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒  
Permian Corp. Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 1702 Farmington, NM 87499

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒  
Northwest Pipeline Corporation Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 90 Farmington, NM 87401

If well produces oil or liquids, give location of tanks. Unit H Sec. 10 Twp. 26N Rge. 4W 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.

BDS Shaw

(Signature)

Admin. Supervisor

(Title)

1-2-85

(Date)

OIL CONSERVATION DIVISION

APPROVED \_\_\_\_\_

BY \_\_\_\_\_

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.

Separator Forms C-104 must be filed for each pool in multiply completed wells.