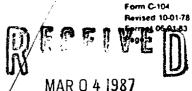
STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE. NEW MEXICO 87501



REQUEST FOR ALLOWABLE

OIL CON. DIV.,

AND DIST. 3 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Amoco Production Company 2325 E. 30 St., Rarmington, NM 87401 Other (Please explain) Change in Lease Name - to delete Change in Transporter of: word "Tribal" Dry Gos Oil Recompletion 1997 It All 3 1997 Thance in Deneralip Casinghead Gas Condensate Il change 61 dwherehip give name and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Kind of Lease Leone No. Well No. | Pool Name, Including Formation ic Apach State, Federal or Fee Federal Jicarilla Apache A-118 17 NE Ojito Gallup-Dakota. Location 1120 : 765 Feet From The South Line and Unit Letter 26N Range 3W , NMPM. County Township Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Andrean (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of CII K Permian (Lin 37 P. O. Box 1702, Farmington, NM 87499
Address (Give address to which approved copy of this form is to be sent) Permian Corporation Name of Authorized Transporter of Casinghead Cas (X) or Dry Cas El Paso Natural Gas Company Caller Service 4490, Farmington, NM 87499 Rge. is gas actually connected? Unu Twp. If well produces oil or liquids, give location of tanks. 26 26 3 Yes 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. **DIL CONSERVATION DIVISION** VI. CERTIFICATE OF COMPLIANCE APPROVED

Ithereby certify that the rules and regulations of the Oil Conservation Division have heen complied with and that the information given is true and complete to the best of my knowledge and belief.

(Signature) Adm. Supervisor

2-26-87

(Date)

(Title)

BY. 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 deepens well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULK 111.

All sections of this form must be filled out completely for allow on new and recompleted wells.

Fill out only Sections I. II. III. and VI for changes of owner name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multip:

completed wells.

TITLE .