

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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| LAND OFFICE            |     |
| TRANSPORTER            | OIL |
|                        | GAS |
| OPERATION              |     |
| 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

I. Operator Amoco Production Company

Address 2325 E. 30th Farmington NM 87401

Reason(s) for filing (Check proper box):

|  |  |                                     |                                  |
|--|--|-------------------------------------|----------------------------------|
| <input type="checkbox"/> New Well            | Change in Transporter of:                          | <input type="checkbox"/> Oil        | <input type="checkbox"/> Dry Gas |
| <input type="checkbox"/> Recompletion        | <input checked="" type="checkbox"/> Casinghead Gas | <input type="checkbox"/> Condensate |                                  |
| <input type="checkbox"/> Change in Ownership |  |                                     |                                  |

Other (Please explain):

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OIL CONSERVATION DIVISION

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

II. DESCRIPTION OF WELL AND LEASE

|   |                       |  |  |                                  |
|---|-----------------------|--|--|----------------------------------|
| Lease Name<br><u>C.A. McAdams B</u>   | Well No.<br><u>2E</u> | Pool Name, including Formation<br><u>Angel Peak Gallup</u> | Kind of Lease<br>State, Federal or Fed<br><u>Fed</u> | Lease No.<br><u>SF-077 941-A</u> |
| Location  |                       |  |  |                                  |
| Unit Letter <u>B</u> : <u>795</u> Feet From The <u>North</u> Line and <u>1795</u> Feet From The <u>East</u> |                       |  |  |                                  |
| Line of Section <u>28</u> Township <u>27N</u> Range <u>10W</u> NMPM, <u>San Juan</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"/>         | Address (Give address to which approved copy of this form is to be sent) |
| <u>Permian Corporation</u>   | <u>P.O. Box 1702 Farmington NM 87499</u>                                 |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| <u>El Paso Natural Gas Company</u>   | <u>Caller Service 4990 Farmington NM 87499</u>                           |
| If well produces oil or liquids, give location of tanks.   | Unit Sec. Twp. Rge. Is gas actually connected? When                      |
|  | <u>B 28 27N 10W No</u>   |

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.

B.S. Shaw

(Signature)

Adm. Supervisor

(Title)

October 11, 1988

(Date)

OIL CONSERVATION DIVISION  
OCT 12 1988

APPROVED \_\_\_\_\_, 19 \_\_\_\_

BY B.S. Shaw

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

