STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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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

Operator Amo do Divisido de la compansión de la compansió		TIS ON TOIL AND NAT	URAL GAS	
Amoco Production Compa			DECEN	
SOI Airport Drive Fam Resson(s) for liling (Check proper box) New Well	Change in Transporter of:	Other (Pleas	e explain) JAN22 1000	(5 (1) (1
Recompletion Change in Ownership	Ott Castnehood Cas	Ory Gas Condensate)
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL AND	LEASE			
Scott Gas Com	/ Basin Dakota		Kind of Lease State, Federal or Fee Fix	Legse N
Unit Lotter A: 790	Feet From The North	ine and <u>990</u>	Feet From The Cast	
Line of Section / Townsh	to 30 N Range		Santian	
III. DESIGNATION OF TRANSPOR	TER OF OIL AND NATTIRA	I CAS		Coun
Name of Authorized Transporter of CII Permian Corp.	or Candensate	Againes (Give address to	which approved copy of this form is	
Name of Authorized Transporter of Castingn	end Car C	1 . O. DOX 1/0	2 FAMMINGTON NM 8740	10
El Paso Natural Gas Com	ead Gas ar Ory Gas A	P. O. Box and	Farmington, NM 8740	to be sent)
If well produces oil or liquids, Uni	1 Sec. Twp. Rge.	is das actually connected	when when	
this production is commingled with the	et from any other lease or pool	Tive comments	(·
OTE: Complete Parts IV and V on	reverse side if necessary.	give commingling order	number:	
. CERTIFICATE OF COMPLIANCE		CIL CO	NSERVATION DIVISION	
creby certify that the rules and regulations of in complied with and that the information give knowledge and belief.	the Oil Conservation Division have in is true and complete to the best of	APPROVED	JAN 25 1985	19
1	. !	9Y	harles Sholson	
BDShaw			PUTY OIL & GAS INSPECTOR, DIS	
(Signature) Admin. Superviso	or	If this is a reques	e filed in compliance with eul r it for allowable for a newly drille e accompanied by a tabulation of il in accordance with sull it.	d or despen
(Tule) 1-2-85			in term was be did a	
(Dete)		Fill out only Sec- well name or number, or	tions I. II. III. and VI for change transporter or other such change	-1
		Separate Forms Commission wells.	-104 must be filed for each poo	in multipl