

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
	GAS
OPERATION	
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OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

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DEC 29 1988

OIL CON. DIV.  
DIST. 3

I. Operator Amoco Production Company

Address 2325 East 30th Street, 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 type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership			

Other (Please explain) Pool Name Change  
Case #9420 Order #R-87108  
from Blaine Felt

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>John F Shaw</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Basin Fruitland Coal Gas</u>	Kind of Lease State, Federal or Fee <u>Fed</u>	Lease No. <u>SF 077231A</u>
Location				
Unit Letter <u>B</u> : <u>1060</u> Feet From The <u>North</u> Line and <u>1850</u> Feet From The <u>East</u>				
Line of Section <u>14</u> Township <u>30N</u> Range <u>9W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Permian Corp</u>	<u>P.O. Box 1702 Farmington NM 87499</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas Co</u>	<u>Caller Service 4990 Farmington NM</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? when
<u>B</u> <u>14</u> <u>30N</u> <u>9W</u>	<u>Yes</u> <u>5-5-88</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.

\_\_\_\_\_  
(Signature)  
Jim Supervisor  
(Title)  
12-28-88  
(Date)

OIL CONSERVATION DIVISION

**JAN 04 1989**

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

BY ORIGINAL SIGNED BY ERNIE BUSCH

TITLE DEPUTY OIL & GAS INSPECTOR, DIST. 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 filled for each pool in multiply completed wells.

NE. MEXICO OIL CONSERVATION COMMISSIC  
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

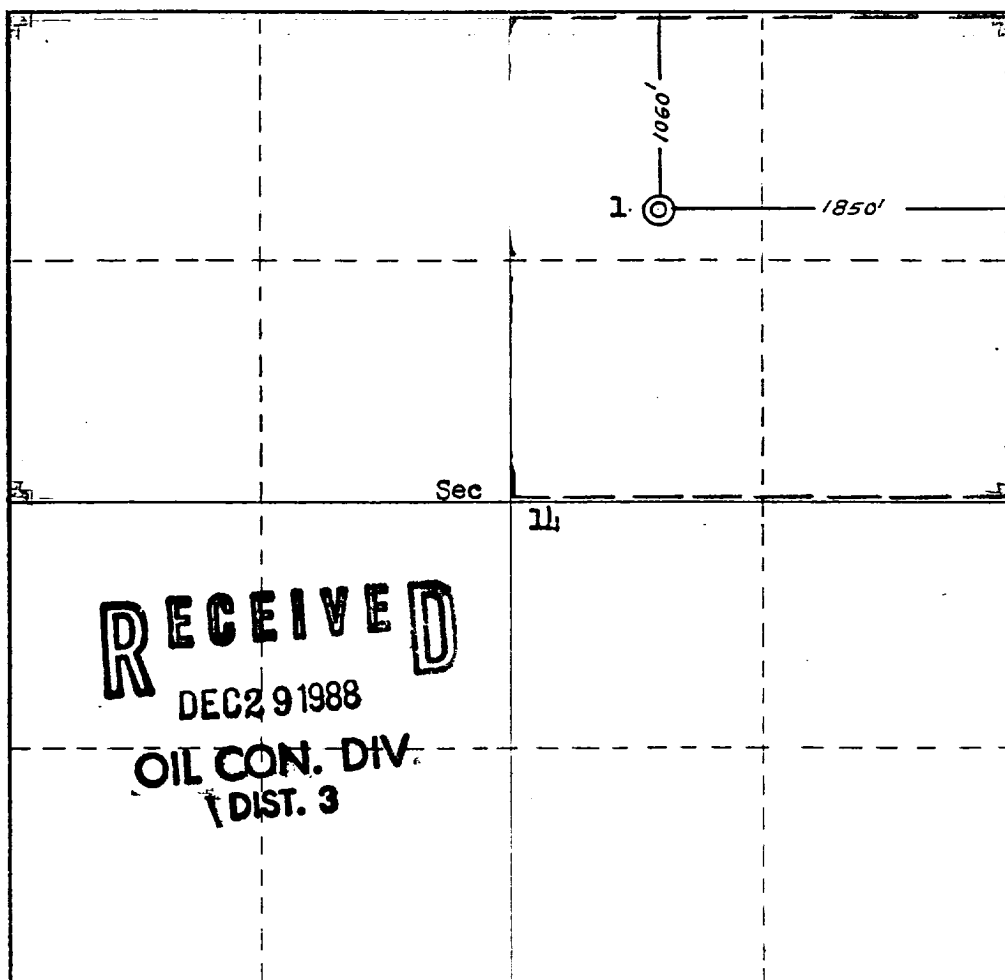
Operator <b>Amoco Production Company</b>			Lease <b>John F. Shaw</b>			Well No. <b>1</b>		
Unit Letter <b>B</b>	Section <b>14</b>	Township <b>30N</b>	Range <b>9W</b>	County <b>San Juan</b>				
Actual Footage Location of Well: <b>1060</b> feet from the <b>North</b> line and <b>1850</b> feet from the <b>East</b> line								
Ground Level Elev. <b>6015</b>	Producing Formation <b>Fruitland</b>		Pool <b>Basin Fruitland Pool Gas</b>			Dedicated Acreage: <b>3.20 1/2</b> Acres		

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

*K. K. Stratton*

Name  
**K. K. Stratton**

Position  
**Adm. Supv.**

Company  
**AMOCO PRODUCTION COMPANY**

Date  
**12-28-88**

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed  
**May 11, 1972**

Registered Professional Engineer and/or Land Surveyor

*Fred B. Kerr Jr.*  
**Fred B. Kerr Jr.**

Certificate No.

**3950**

0 330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600