## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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FILE				
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LAND UFFICE		<u> </u>	<u> </u>	
TRANSPORTER	OIL	Ī	İ	
	GAG		<u> </u>	
OPERATON				
PROBATION OFFICE			1	

Adm. Supervisor

5-22-87

(Title)

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE. NEW MEXICO 8750

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

REQUEST FOR ALLOWABLE

TRANSPORTER GAS	REQUEST FOR ALLOWABLE				
PRODATION OFFICE	AUTHORIZATION TO TRA		URAL GAS		
1.	AUTHORIZATION			7/30	
Operator					
Amoco Production Company					
Address					
2325 East 30th Street; Fa	armington, RM 07401	Other (Plea	se explain!		
Reason(s) for living (Check proper box)	Change in Transporter of:				
Recompletion	o::	Dry Gos			
Change in Ownership	Casinghead Gas	Condensate			
If change of ownership give name and address of previous owner					
		•	•	· · · · · · · · · · · · · · · · · · ·	
II. DESCRIPTION OF WELL AND I	Well No.   Pool Name, Including	q Formation	Kind of Lease	Lease No.	
Lease Name	1 1		State, Federal or Fee Federa	1 NM 0610	
Federal Gas Com ALL	<u></u>	<del></del>		-	
Unit Letter B : 1090	Feel From The North	Line and 1640	Feet From The East		
			San Juan	County	
Line of Section 14 Towns	hip 30N Ronge	11W , MM!	PM. San Juan		
		<b>;</b>		<u> </u>	
III. DESIGNATION OF TRANSPO	RTER OF OIL AND NATUL	Addiess (Give addres	s to which approved copy of this form	is to be sent)	
Name of Authorited Transporter of CII	J 61 CONTONION (T)	D 0 Por 17	02. Farmington, NM 87	499	
Permian Corporation  Name of Authorized Transporter of Cosine	chead Cas or Dry Gas 📉	Address /Cive agares	I to which approved copy of this join	n 13 10 be semi	
Sunterra Gas Gathering	Company	P. O. Box 26400; Albuquerque, NM 87125			
	Jnii Sec. Twp. Rge.				
If well produces of or liquids, give location of tonks.	B : 14 : 30N:11		9-22-83		
If this production is commingled with	that from any other lease or po	ool, give commingling or	der number:		
NOTE: Complete Parts IV and V	on reverse sine if necessary	!! 0"	CONSERVATION DIVISION	J	
VI. CERTIFICATE OF COMPLIANCE	CE	0,1	ANN S	6/1987	
I hereby certify that the rules and regulations		APPROVED	MAL		
been complied with and that the information	given is true and complete to the bes	r of	Frank J.	Save	
my knowledge and belief.		BY	SHPERVISOR	DISTRICT #	
O(C)		TITLE	SOF ERVISOR	DISTRICT THE	
$\langle C \rangle \setminus \langle L \rangle$		This form is	to be filed in compliance with	RULE 1104.	
120 naw			for ellowable for a newly	drilled or deeper	
(Signature)	re)	The state of the form E	must be accompanied by a tabulat	10n 01 the Gevitt	

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 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.