

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  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED BY  
FEB 21 1985  
O. C. D.  
ARTESIA, OFFICE

Form C-104  
Revised 10-01-78  
Format 05-01-83

RECEIVED BY  
FEB 26 1985  
O. C. D.  
ARTESIA, OFFICE

I. Operator  
*Amoco Production Company*

Addressee  
*P.O. Box 68, Hobbs, NM 88240*

Reason(s) for filing (Check proper box)

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

Other (Please explain) *To show transporter of condensate from Empire South Deep Unit ~~to~~ #5 Compressor Facility*

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name <i>Empire So. Deep Unit #5 Compressor Facility - Morrow South</i>	Well No. <i>5</i>	Pool Name, including Formation <i>Empire Morrow South</i>	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <i>F</i> ; 1980 Feet From The <i>North</i> Line and 2180 Feet From The <i>East</i>				
Line of Section <i>31</i> Township <i>17-S</i> Range <i>29-E</i> , NMPM, <i>Eddy</i> 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"/> <i>Permian Corporation Permian (EH 9/1/87)</i>	Address (Give address to which approved copy of this form is to be sent) <i>P.O. Box 1183, Houston TX 77001</i>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <i>*See Below</i>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit <i>F</i> Sec. <i>31</i> Twp. <i>17</i> Rge. <i>29</i>
Is gas actually connected?	<i>Yes</i> When <i>4-1-75</i>

If this production is commingled with that from any other lease or pool, give commingling order number: *Post ID-3*

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.

\*Amoco Prod. Co., Box 367, Andrews, Texas 79714  
Western Gas Inter. Co., Dallas, Texas 75201  
Phillips Pet. Co., 4001 Westbrook, Odessa, Tx. 79761

*Donita Goble*  
(Signature)  
*Administrative Analyst*  
(Title)  
*2-19-85*  
(Date)

OIL CONSERVATION DIVISION  
FEB 28 1985  
APPROVED \_\_\_\_\_, 151  
BY \_\_\_\_\_ Original Signed By  
Leslie A. Clements  
TITLE \_\_\_\_\_ Supervisor District II

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 deviations 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.