STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

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OPERATOR			
PROBATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 37501

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

Separate Forms C-104 must be filled for each pool in multiply

REQUEST FOR ALLOWABLE AND

1.	PORT OIL AND NATURAL GAS	
Amoco Production Company	লি গ্ৰ	
501 Airport Drive Farmington, NM 87401		
	Ciher (Please explosive) JAN 16 1985 JAN 16 1985	
If change of ownership give name and address of previous owner	OIL DIST. 3	
II. DESCRIPTION OF WELL AND LEASE		
Gallygos Canyon Unit 184 Basin Dakota Location	State, Federal or Fee Federal 078828-A	
Unit Letter A: 1160 Feet From The North Lin		
	2W, NMPY, San Juan County	
M. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL Permian Corp.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1702 Farmington, NM 87499	
Name of Authorized Transporter of Casingheda Gas ar Dry Gas Z El Paso Natural Gas Company	P. O. Box 990 Farmington, NM 87401	
if well produces all or liquids, Unit Sec. Twp. Age. give location of lanks. A 28 28N 12W	is gas actually connected? When	
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	CII CONCEDUATION THE	
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	OIL CONSERVATION DIVISION 0 1985	
my knowledge and belief.	BY Stanks.	
$O \times C /$	TITLE SUPERVISOR DETRICT # 3	
SDShaw (Signature)	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation	
Admin. Supervisor (Tule) 1-2-85	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.	
(Date) Fill out only Sections I. II. III, and VI for the well name or number, or transporter, or other such than		