## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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U.S.G.4.		<del>-</del>  -
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TRANSPORTER:	016	+-
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OPERATOR		_
PROBATION OFFIC		+-

## 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

Authorization to transport oil and natural gas  Operator Amoco Production Company  Address  501 Airport Drive Farmington, NM 87401  Restan(s) for filing (Check proper box) New West Change in Transporter of: Resempleston Oil Dry Gas Change in Ownership Castnehead Gas Condensate  If change of awnership give name and address of previous owner  II. DESCRIPTION OF WELL AND LEASE  Lease Name	
Address   Sol Airport Drive Farmington, NM 87401   Restan(s) for filing (Check proper box)   Change in Transporter of:   Presemplation   Oil	_
Sol Airport Drive Farmington, NM 87401	-
New Well   Change in Transporter of:   Other (Please explain)	
New Woll   Change in Transporter of:   Other (Please explain)	
Change in Ownership	
If change of ownership give name and address of previous owner  II. DESCRIPTION OF WELL AND LEASE	
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well No. Pool Name, including Formation	
Galligas Canyon Unit 134 Basin Dakota  Location  State, Federal or Fee Federal 92	Legse Na.
Unit Letter_ M : 875 For Sm. Th. South	200084
Unit Letter M: 875 Feet From The South Line and 845 Feet From The Wast	
	<del></del>
Hange 1200, NMPM, San Juan	County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
or Condensate V	
1. U. Box 1/UZ Farmington, NM 87499	sent)
El Paso Natural Con Commissioned Cas or Dry Gas Address (Give address to which approved convicting to the form in the	
1. 0. Box 990 Farmington, NM 87401	s ent j
If well produces all or liquids. Unit Sec. Twp. Rge. Is gas actually connected? When	
1 17 29N 12W	
this production is commingled with that from any other lesse or pool, give commingling order number:	
OTE: Complete Parts IV and V on reverse side if necessary.	
T CEPTIECATE OF CONTRACT	
I SIC CONSERVATION DIVISION	
hereby certify that the rules and regulations of the OU Co.	)E
ren complied with and that the information given is true and complete to the best of y knowledge and belief.  APPROVED  APPROVED	<u>'J</u>
BY	
TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3	
This form is to be filed in compliance with RULE 1104	١,
(Signature)  Nell, this form must be accompanied by drilled or of	
The state of the s	
(Titie) All sections of this form must be filled out completely form new and recompleted wells.	or allow-
THE TIME TOWN THE THE TABLE THE TABL	
Fill out only Sections I. II. III. and VI for changes of well name or number, or transporter, or other such change of co	
well name or number, or transporter, or other such changes of completed wells.  JAN 16 1935	

OIL COSI. DIV.