STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Qportler				
Amoco Production Company				
501 Airport Drive Farmington, NM 87401				
Reason(s) for filing (Check proper box)	Other (Please explain)			
New Well Change in Transporter of:	Ciner (Fleuse explain)			
Recompletion Q11	ry Gas			
	andensare / A / A			
If change of ownership give name and address of previous owner	1/1/4/			
II. DESCRIPTION OF WELL AND LEASE				
Lease Name Weil No. Pool Name, including F	armation Kind of Lease			
Morris Gas Com C /E Basin Dakota	State, Federal or Fee Fe			
Location	Fee			
Unit Letter I : 1740 Feet From The South Lin	e andFeet From The			
Line of Section 2C Township 29N Range /	OW , NMPM, San Juan County			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	. GAS			
Permian Corp. Perm an (EM. 9 / 1/87)	P. O. Box 1702 Farmington, NM 87499 Ory Gas Address (Give address to which approved copy of this form is to be sent)			
Name of Authorized Transporter of Caminghedd Gas or Dry Gas S El Paso Natural Gas Company	P. O. Box 990 Farmington, NM 87401			
If well predaces all or liquids, Unit Sec. Twp. 18 que actually connected? When give location of tanks. I 26 27N 10W				
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 COMPILANCE OIL CONSERVATION DIVISION				
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.				
\circ	TITLE SUPERVISOR DISTRICT # 3			
This form is to be filed in compliance with succe 1104.				
(Signature) If this is a request for allowable for a newly drilled or deep				
Admin Suporvisar	TALL THE TOTAL BUSINESS SCORDERIES by a tabulation of the 2.			
Admitt. Supervisor				
All sections of this form must be filled out completely to able on new and recompleted wells.				
Fill out only Sections I. II. IV and IV for the				
If I was name or number, or transporter, or other such change of con-				
Separate Forms C-104 must be filed for each pool in multiply completed wells.				
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DIST. 3				