STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION		
SANTA FE		
FILE		
U.1.G.E.		
LANG OFFICE		
TRANSPORTER	OIL	-
	DAS	
ROTARINO		
PROBATION OFF	ICE	

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 97501

Form C-104 Révised 10-01-78 Format 05-01-83 Page 1

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1.	SONT CIE AND NATORAE GAS	
Operator		
Amoco Production Company		
Address		
501 Airport Drive Farmington, NM 87401	The second second	
Reason(s) for filing (Check proper box)	Other (Please explana)	
New Well Change in Transporter of:	Other (Please explain)	
Recompletion	les Con	
Change in Ownership Casinghead Gas	Candensare JAN 03 1355	
If change of ownership give name and address of previous owner	OIL CON. DIV.	
II. DESCRIPTION OF WELL AND LEASE	DIST. 3	
Lease Name Well No. Pool Name, including F	armation Kind of Lease	
Galligas Conyon Unit Come 1616 Basin Dakota	State, Federal or Fee Frdual NM 03654	
Unit Letter N : 350 Feet From The South Lin	ne and 1530 Feet From The West	
Line of Section 23 Township 29N Range		
Cine of Section 23 Township 29N Range	13W , NMPM, SON JUAN COUNTY	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	. CAS	
Name at Authorized Transporter of Oil or Condensate Adacess (Give address to which approved copy of this form is to be sent)		
Permian Corp. Perman (Eff. 9 / 1 /87)	orp. Parman (£11.9/1/87) P. O. Box 1702 Farmington, NM 87499	
Name of Authorized Transporter of Casinghedd Gae or Dry Gas El Paso Natural Gas Company	Address (Give address to which approved copy of this farm is to be sent) P. O. Box 990 Farmington, NM 87401	
if well produces oil or liquids, Unit Sec. Twp. Rgs. Qive location of tanks. N 23 29N 13W	Is gas actually connected? When	
If this production is commingled with that from any other lease or pool,	Tive commending and a curban	
	Kine committeling order unmoet:	
NOTE: Complete Parts IV and V on reverse side if necessary.		
T. CERTIFICATE OF COMPILANCE OIL CONSERVATION DIVISION		
hereby certify that the rules and regulations of the Oil Conservation Division have peen complied with and that the information given is true and complete to the best of		
my knowledge and belief.		
/		
$\bigcirc \times \bigcirc /$	TITLE DEPUTY CLA CAS HATECTON, CIST. #3	
$\langle \langle \rangle \rangle h_{av}$	This form is to be filled in compliance with RULE 1104.	
(Signature).	If this is a request for allowable for a name dutted and	
Admin. Supervisor	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
(Title) 1-2-85	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 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.	