STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	1	
. A DEC ON CA	G AS		
OPERATOR			
PROBATION OFFICE			

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

Form C-104 Revised 10-01-78 Format C6-01-83 Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL G

I. AUTHORIZATION TO T	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
Amoco Production Company			
Address			
501 Airport Drive Farmington, NM 87401			
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Wetl Change in Transporter of:	· · · · · ·		
Recompletion CII	Dry Gas		
Change in Ownership Casinghead Gas	Candensate		
If change of ownership give name and eddress of previous owner			
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Well No. Pool Name, Inclu			
Galligos Conyon Unit 866 Basin Dak	ota State, Federal or Fee Federal 578926		
Unit Letter P: 1100 Feet From The South	Line and 800 Feet From The East		
Line of Section 35 Township 29N Rang	10 /3W , NMPM. San Juan County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NAT			
Name of Authorized Transporter of Cit Permian Corp.	Address (Give address to which approved copy of this form is to be sent)		
Permian Corp.	P. O. Box 1702 Farmington, NM 87499		
Name of Authorized Transporter of Casinghead Gas or Ory Gas 12 El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990 Farmington, NM 87401		
th well produces all ar liquids. Unit Sec. Twp. Fic. Qive location at tanks. P 35 29N 1.	19. Is gas actually connected? When 3ム		
If this production is commingled with that from any other lesse or	pool, give commingling order number:		
NOTE: Complete Parts IV and V on reverse side if necessary.			
(1012. Complete land if and if on levelse side if necessary.			
VI, CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
I hereby certify that the rules and regulations of the Oil Conservation Division been complied with and that the information given is true and complete to the b			
my knowledge and belief.	BY harles Sholson		
$\dot{\circ}$	TITLE DEPUTY GIL & SAS INS. LC. GR., LIST. #3		
This form is to be filed in compliance with RULE 1104			
(Signature) If this is a request for allowable for a newly drille well, this form must be accompanied by a tabulation of			
Admin. Supervisor teets taken on the well in accordance with Ault it. All sections of this form must be filled out completely able on new and recompleted wells.			
1-2-85	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.		
1025	Separate Forms C-104 must be filled for each pool in multiply completed wells.		
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