## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	DIL	
	GAS	
DPERATON		
PROBATION OFF	ĸe	

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

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

TA FE. NEW MEXICO 87501

REQUEST FOR ALLOWABLE

2325 East 30th St

RECEPT

AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS . O// Operator Amoco Production Comp 2325 East 30th Keeson(s) for filing (Check proper box) Other Please explains Change in Transporter of: A Dry Co. OII Recompletion Change in Ownership Casinghead Gas Condensais If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL Leose No. well No. | Pool Name, including Formation Kind of Lease State, Federal or Fee 34E Basin Dakota Gallegos Canyon Location Feel From The South NMPM. 29N County Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Addiess (Give address to which approved copy of this form is to be sent) or Condensate 🔀 Name of Authorized Transporter of CII Box 1702 formington. NM Permian Corporation Address (Give address to which approved wopy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas

If this production is commingled with that from any other lease or pool, give commingling order number:

Twp.

Rq.

29N:12W

NOTE: Complete Parts IV and V on reverse side if necessary.

## VI. CERTIFICATE OF COMPLIANCE

Amoco Production

if well produces oil or liquids,

give location of tanks.

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.

Original Signed By B. D. Shaw	
(Signature)	
Adm Sypervisor	
(Title)	
4/7/88	
(Date)	

## OIL CONSERVATION DIVISION

APPROVED	APR 12 1908		
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TITI E	SUPERVISION DISTRICT # 3		

Farmington

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deeponed well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I. U. 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.