Submit 3 Copies
Appropriate District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
AMOCO PRODUCTION COMPANY

Well API No.
3004526735 00

Address
P.O. BOX 800, DENVER, COLORADO 80201

Reason(s) for Filing (Check proper box)
New Well [ ]
Recompletion [ ]
Change in Operator [ ]
Change in Transporter of: Oil [ ] Dry Gas [XX] Casinghead Gas [ ] Condensate [ ]
Other (Please explain) [ ]

If change of operator give name and address of previous operator

I. DESCRIPTION OF WELL AND LEASE

71599

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
CITY OF FARMINGTON	2	BASIN DAKOTA (PRORATED GAS)		

Location
Unit Letter J : 2159 Feet From The FSL Line and 1712 Feet From The FEL Line
Section 10 Township 29N Range 13W NMPM, SAN JUAN County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [ ] or Condensate [ ] 131418
MERIDIAN OIL INC.
Address (Give address to which approved copy of this form is to be sent)
3535 East 30th Street, Farmington, NM

Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [XX] 131430
CONOCO INC.
Address (Give address to which approved copy of this form is to be sent) 87401
3817 N.W. Expressway, OKC, OK 73113

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
						6-14-87

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

IV. COMPLETION DATA

13145D

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff Res'v.

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

RECEIVED
APR 8 1993
OIL CON. DIV.
DIST. 3

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

D. S. Sullivan
Signature
D.S. Sullivan — Business Analyst
Printed Name — Title
3-26-93 — (303) 830-4756
Date — Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 8 1993

By [signature]
SUPERVISOR DISTRICT #3

Title