STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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SAMEA FE			Т	
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U.8.Q.4.				
LANG OFFICE		1		
TRANSPORTER	OIL			
	GAS			
OPERATOR				
PROBATION OFFICE				

OIL CONSERVATION DIVISION P. G. 8GX 2088 SANTA FE, NEW MEXICO 87501

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

REQUEST FO	DR ALLOWABLE		
PERATOR AND			
AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GAS		
Cperator			
Amoco Production Company			
Address			
501 Airport Drive Farmington, NM 87401			
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Weti Change in Transporter of:	oner (treese explain)		
	ky Gas		
Change in Ownership Casinghead Gas	andens are		
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE			
Lague Name Weil No. Pool Name, Including F	formation Kind of Lease Lease No.		
L. C. Kelly / Basin Dakota	State, Federal or Fee Federal 081239		
Location	180101 081239		
700			
Unit Letter M: 790 Feet From The South Lir	ne and 1055 Feet From The West		
Line of Section 5 Township 30N Range /	2W, NMPM, San Juan County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	L GAS		
Name of Authorized Transporter of Cil or Condensate S Aggress (Cive address to which appropriate ages of the first transporter of the first tran			
Permian Corp. Permian (Eff. 9 / 1 /27) P. O. Box 1702 Farmington, NM 87499			
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Company P. O. Box 990 Farmington, NM 87401			
If well produces out or inquies.	Is que actually connected? When		
give location of tanks. M 5 30N 12W			
If this production is commingled with that from any other lease or pool,	zive communating order number		
	g Comminging order number.		
NOTE: Complete Parts IV and V on reverse side if necessary.			
	9		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
	1 LAN 25,100E		
hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED			
complied with and that the information given is true and complete to the best of however and belief.			
my knowledge and select.	BY		
DEPUTY OH & GAS INSPECTOR THE			
DEPUTY OIL & GAS INSPECTOR, DIST. #3			
This form is to be filed in compliance with RULE 1104.			
DD51000/0			
Admin. Supervisor	If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.		
1-2-85 0 %	All sections of this form must be filled out completely for allowable on new and recompleted wells.		
1-2-03 A	Fill out only Sections ! If I'll and VI for changes of aware		
28 G	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.		