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U.S.D.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATION	
PRODUCTION OFFICE	

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

JAN 05 1988

Operator Amoco Production Company	
Address 2325 E. 30th Street, Farmington, NM 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change Pool Name per Commission Order R-8544
Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Condensate <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas	

If change of ownership give name and address of previous owner \_\_\_\_\_

I. DESCRIPTION OF WELL AND LEASE				
Lease Name Fred Phillips C	Well No. 3A	Pool Name, including Formation West Lindrith Gallup-Dakota	Kind of Lease State, Federal or Free Federal	Lease No. NM01138
Location Unit Letter <u>H</u> : <u>1820</u> Feet From The <u>North</u> Line and <u>960</u> Feet From The <u>East</u> Line of Section <u>15</u> Township <u>25N</u> Range <u>3W</u> , NE 10th, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation		Address (Give address to which approved copy of this form is to be sent) P.O. Box 1702, Farmington, NM 87499		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company		Address (Give address to which approved copy of this form is to be sent) Caller Service 4490, Farmington, NM 87499		
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 15	Twp. 25N	Rge. 3W
Is gas actually connected?		when		
Yes		4-1-87		

If this production is commingled with that from any other lease or pool, give commingling order number: R-7651

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

VI. 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 is true and complete to the best of my knowledge and belief.	
<u>BDS Shaw</u> (Signature)	
Adm. Supervisor	
(Title)	
<u>12-31-87</u> (Date)	

OIL CONSERVATION DIVISION	
APPROVED	<u>Frank J. Shaw</u> 19 <u>88</u>
BY	
TITLE	
This form is to be filed in compliance with RULE 1104.	
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
All sections of this form must be filled out completely for allowable on new and recompleted wells.	
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 multiple completed wells.	