STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

				-
	-	1		
DIST RIGUTION			1	_
SAMPA PE			\top	_
FILE			\top	_
U.S.G.A.			\top	
LAMO OFFICE	1	T	-	
TRANSPORTER	GIL	1		7
	BAB			1
OPERATOR		1	1	7
PROBATION OFFICE			1	•

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

Form C-194 Revised 10-01-75 Format 06-91-83 Page 1

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GA

[.	AUTHORIZATION 1	TO TRA	NSPORT OI	L AND NAT	URAL GAS		
Cpereiar		*		· · · · · · · · · · · · · · · · · · ·			
Amoco Production Compan	y						
501 Airport Drive Farm	ington, NM 874	01					
Resson(s) for filing (Check proper box)				Other (Pleas	re explain)		
New Well	Change in Transporter	r ol:					_
Recompletion	∑ on		Dry Gas				
Change in Ownership	Casinghees Gas		Condensate	!			
If change of ownership give name							
and address of previous owner							
II. DESCRIPTION OF WELL AND L	EASE						
Legae Name	Well No. Pool Name,				Kind of Lease		Loged No.
Gallegos Conyon Unit	198 Basin	Dakota	1		State, Federal or F	· Federal	020008111
Cocaraga							7200099
Unit Latear N : 1010	Feet From The 50	wth i	ine and	2090	Feet From The	410.56	
Line of Section 20 Townshi	0 28N	Range	12W	, NMPW	. San Jua	n	County
III. DESIGNATION OF TRANSPOR							
III. DESIGNATION OF TRANSPOR	OF CANDENSON	VATURA	IL GAS				
Permian Corp.	_	•	P. O. Box 1702 Farmington, NM 87499				
Name of Authorized Transparter of Casinghi	ead Cae 🔀 or Dry G	43 🗀			to which approved co		
El Paso Natural Gas Comp	any		P. O.	Box 990	Farmington	, NM 87401	
If well produces oil or liquids, Uni	, , , , , , , , , , , , , , , , , , , ,	Rge.	is gas act	udily connect	rd? When	· · · · · · · · · · · · · · · · · · ·	
give location of tante.	10.0	124					
fithis preduction is commingled with the	at from any other lease	e or pool.	. give comm	ingling order	numberr		
NOTE: Complete Parts IV and V on							
	•	4 , y.	ч				
VI. CERTIFICATE OF COMPLIANCE				air c	ONSERVATION	DIVISION .	400 °
hereby tentify that the rules and regulations of	the Oil Consequeing Div					IAN 3	198 5
ocen complied with and that the information give	en is true and complete to t	ision nave the best of	APPRO	VED		X	19
ny kno wicige and belief.	•		97	`<	\leq 170) /	
/			∥	<u> </u>	rank !	Save	
$O \times C/$			TITLE.			SUPERVISOR DIS	TRICT # 2
(5/) Shan			Thi	form is to	be filed in compli	•	
(Signature)	 		If th	de la a requi	est for allowable /		1104.
Admin. Supervisor	•				be accompanied by		
/Tules			1		ATT TO MECOLGINGS	WICH RULE 111.	
1-2 -85 -			able on	new and reci	his form must be fi empleted_wells.	mied out complet	ely for sile
(80.0)			FIII	out only se		manification above	****
		}	!	e ar number,	Dietie	.M. F - 1919.	of condition.
		i	Completed	rate Forms	LACO	ed tor Ted	I in multiply

JAN 03 1985

OIL CON. DIV.