STATE OF NEW MEXICO	
ENERGY AND MINERALS DEPARTMENT	
Oref are ut IQu	Form C-104
OIL C	ONSERVATION DIVISION Format 06-01-83
v.1.a.	P. O. 80 X 20 8 8
CAMO OFFICE SAN	TA FE. NEW MEXICO 87501
TRAMEPORTER GAS	
OPERATOR	REQUEST FOR ALLOWABLE
THOUSE GOFICE	AND SOLVER SOLVE
I. AUTHORIZATIO	IN TO TRANSPORT OIL AND NATURAL GAS 1212 2 1985
1	W JAMES JOSE
Amoco Production Company	(0) 3
501 Airport Drive Commission	Off Mest.
Recesons for Ming (Check proper box)	
Change in Transpor	Other (Please explain)
OII	Ory Gas
Caeinghood Gai	
If change of awnership give name	
and address of previous owner	
II. DESCRIPTION OF WELL AND LEASE	
Well No Good No	e, including Formation
Gallegas Canyon Unit D 254 Pinor	Vind of Code
Location	on Gallup State, Foderal or Foo Federal SF0844
Unit Letter I: 720 Feet From The	254
Line of Same I C	Line and 1780 Foot From The South
10 minip 28 N	Range 11 W . NMPL: San Juan
II. DESIGNATION OF TRANSPORTER OF OIL AND	County
Name of Authorized Transporter of CII S or Condensate	NATURAL GAS
Permian Coro. Bosmin and a	The follow dedress to watch approved come of the
or Dry C	' ' • • • • • • I/UZ Farmington NM 8//00
El-Paso Natural Gas Company	P. O. Box 990 Farmington, NM 87401
well produces all or liquids, Unit , Sec. Twp.	rie que actuality connected?
	(11/.)
this production is commingled with that from any other lease	e or pool, give commingling order number
OTE: Complete Parts IV and V on reverse side if necess	(3r)
CERTIFICATE OF COMPLIANCE	
	OIL CONSERVATION DIVISION
reby certify that the rules and regulations of the Oil Conservation Divi	
n complied with and that the information given is true and complete to the knowledge and belief.	the best of APPROVED JAN 22, 1985
/	BY Transal. Jave
$O \setminus C $	TITLE CHARLES TO THE
() () () () ()	THE RVISUR DISTRICT # 4.
Signature)	This form is to be filed in compliance with RULE 1104.
Admin. Supervisor	well, this form must be according to a newly drilled or despendent
(Tule)-	tests taken on the well in accordance with atter the
1-2-85	All sections of this form must be filled out completely for allowable on new and recompleted wells.
(Date)	Fill out only section to a

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 filled for each pool in multiply completed wells.

(Dece)