STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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TANTA FE		1	+	_
FILE		T	1	_
u.s.a.s.		1	-	_
LAND OFFICE		1	7	
TRANSPORTER	OIL.	1		_
	GAS		7	
OPERATOR		1	1	7
2500 ATION 000		-		-

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

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

REQUEST FOR ALLOWABLE

PROBATION OFFICE	ALITHOPITATION TO TE	AND			
Coording (AUTHORIZATION TO TRA	wsport oi	L AND NAT	URAL GAS	
Amoco Production Company					
Address					
501 Airport Drive Farmin	gton, NM 87401				
leason(s) for liling (Check proper box)			Other (Pleas	A 450/0.01	
1 = -	Change in Transporter of:	_	J. 11. 11. 11. 11. 11. 11. 11. 11. 11. 1	e explain)	
Recompletion	on	Dry Gas			
_ Change in Ownership	Cestneheat Gas	Condensate			
change of ownership give name id address of previous owner					
DESCRIPTION OF WELL AND LEA	SE				
	Weil No. Pool Name, including			Kind of Lease	Lease No.
Martin Gas Com E	/ Basin Dakota	a		State, Federal or Fee Feder	01 SF
Unit Letter L : 2425	Teel From The South	Line and	790		
Line of Section /5 Township	27N Banca	1000	. I	<i>C.</i> - 1	
			, NMPM	. Jan Juan	County
DESIGNATION OF TRANSPORTE	R OF OIL AND NATUR	AL GAS			
eme of Authorized Transporter of On Permian Corp.	or Condensate	Address (Give address :	a which approved capy of this fo	rm is to be sent;
ime of Authorized Transporter of Castinghead	C(-)	P. 0.	Box 1702	? Farmington, NM 8	17499
El Paso Natural Gas Compan	Gas or Dry Gas Sy	P. O.	Rox 990	Farmington, NM 8	rm is to be sent)
well produces all or liquids, Unit	Sec. Twp. Age.		natty connects		7401
ve location of tanks.	: 15 27N 100			ar , when	
his production is commingled with that f			ingling order		
OTE: Complete Parts IV and V on rea		er give commi	merme order	number:	
	verse side if necessary.	.1			
CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION			
repy certify that the rules and regulations of the	Oil Conservation Division have	APPRO		- HALL	1005
n complied with and that the information given is knowledge and belief.	true and complete to the best of	AFFRO	VED	Sair	
/		BY			Save /
\circ		TITLE		<u>Sup</u> ervisor	DISTRUCT # 3
$\langle \langle \langle \langle \rangle \rangle \rangle$]			
-1000 man		This	(orm is to t	e filed in compliance with	*ULE 1154.
(Signature) Admin. Supervisor				at for allowable for a newly be accompanied by a tabulati	
		()		m secondance Alta MAP	C 111.
(T(tle) - 1-2-85	DECEINE	All on r	sections of the	us form must be filled out completed wells.	impletely for allow-
(Date)	ALERE VE	Fill	out only 3.	ctions I. II. III. and V7 for	changes of accept
(550)	IANO	IUT name	or number, c	ortions I, II, III, and VI for or transporter, or other such of	hange of condition.
	JAN 03 1985	completed		C-104 must be filled for each	in pool in multiply
	OIL CON. DIV				
	DIST. 3			· •	
	0101. 3				