STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

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

Form C-104 Revised 10-01-78 Format C6-01-83 Page 1

Separate Forms C-104 must be filed for each pool in multiply completed wells.

REQUEST FOR ALLOWABLE

AUTHORIZATION TO TRA	AND WSPORT OIL AND NATURAL GAS		
Operator			
Amoco Production Company			
501 Airport Drive Farmington, NM 87401			
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Welt Change in Transporter of:			
Recompletion QII	Dry Gas		
Change in Ownership Casinghed Gas	Candensate		
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Well No. Pool Name, including			
Galligos Conyon Unit /67 Basin Dakot	a State, Federal or Fee Fee		
Unit Letter C: 865 Feet From The North	Line and 2435 Feet From The West		
Line of Section 18 Township 28N Range	11W, NMPM, San Juan County		
Citie of agential 10 League White State Lands	110 , NMPM, San Juan County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATUR	AL GAS		
Name of Authorized Transporter of Oil or Condensate Z	Asaroes (Give address to which approved copy of this form is to be sent)		
Permian Corp. Permian (Eff. 9 / 1 /87)	P. O. Box 1702 Farmington, NM 87499		
El Paso Natural Gas Company	P. O. Box 990 Farmington, NM 87401		
if well produces oil or liquids, Unit Sec. Twp. Rgs. que location of tanzs.	Is gas actually connected? When		
If this production is commingled with that from any other lease or po-			
NOTE: Complete Parts IV and V on reverse side if necessary.			
	И		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION 400 1985		
hereby certify that the rules and regulations of the Oil Conservation Division has			
peen complied with and that the information given is true and complete to the best (
my knowledge and belief.	BY		
·	TITLE SUPERVISOR DETRICT # 3		
$\langle \langle \rangle \rangle h_{au}$	This form is to be filed in compliance with RULE 1104.		
(Signature) Admin. Supervisor	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 AULE 111.		
(Title)	All sections of this form must be filled out completely for silowable on new and recompleted wells.		
1-2-85	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.		

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