

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-104
Revised 10-01-78
Format 06-01-83
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NO. OF COPIES DESIRED	
DISTRICT OFFICE	
SANTA FE	
FILE	
U.S.M.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
MAY 11 1988
OIL CONSERVATION DIVISION

I. Operator: Amoco Production Company
Address: 2325 East 30th Street
Reason(s) for filing (Check proper box):
 New Well
 Recompletion
 Change in Ownership
 Change in Transporter of:
 Oil
 Casinthead Gas
 Dry Gas
 Condensate
 Other (Please explain): From Fogelson 26 #1
Change well name

If change of ownership give name and address of previous owner: Beta Development Box 1659 Midland, TX 79701

II. DESCRIPTION OF WELL AND LEASE
 Lease Name: Fogelson Gas Com Well No.: 1 Pool Name, including Formation: Basin Dakota Kind of Lease: Federal Lease No.: SF 878144
 Location: Unit Letter P; 1050 Feet From The South Line and 1000 Feet From The East
 Line of Section 26 Township 30N Range 11W NMPM. San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
 Name of Authorized Transporter of Oil or Condensate : 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 Casinthead Gas or Dry Gas : El Paso Natural Gas Company Address (Give address to which approved copy of this form is to be sent): Caller Service 4990 Farmington NM 87499
 If well produces oil or liquids, give location of tanks: Unit P Sec. 26 Twp. 30N Rge. 11W Is gas actually connected? Yes

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

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.
BSShaw
 (Signature)
Adm Supervisor
 (Title)
May 6, 1988
 (Date)

OIL CONSERVATION DIVISION
MAY 11 1988
 APPROVED: _____
 BY: Frank J. Shaw
 SUPERVISOR DISTRICT 10
 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 conditions.
 Separate Forms C-104 must be filed for each pool in multiply completed wells.