## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

10010 SECENCE			
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR .			
PROBATION OFFICE			

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

II. DESCRIPTION OF WELL AND LEASE  Lease Name  Amoco State S Corv  3	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
Ressor(s) for filing (check proper box)    New West    New West    New West    New West    Change in Ownership   Casingheed Gas   Candenane     Change in Ownership   Casingheed Gas   Candenane     Change of ownership give name   Amoco Production Company, Box 68, Hobbs, New Mexico 88240    If Change of ownership give name   Amoco Production Company, Box 68, Hobbs, New Mexico 88240    If Change of ownership give name   Amoco Production Company, Box 68, Hobbs, New Mexico 88240    If Change of ownership give name   Amoco Production Company, Box 68, Hobbs, New Mexico 88240    If Change of ownership give name   Amoco Production Company, Box 68, Hobbs, New Mexico 88240    If Change of ownership give name   Amoco Production Company, Box 68, Hobbs, New Mexico 88240    If Change of ownership give name   Amoco Production Company, Box 68, Hobbs, New Mexico 88240    If Lease No.   Amoco State S. C.   Amoco Production State   Amoco Production Of Transporter of Casingheous Gas   or Dity Gas (Amoco Production State   Amoco Production State   Amoc	Operator				
Response (Charge proper box)	Veirs Production Company				
New Well	223 W. Wall Suite 500, Midland, Texas 79701				
Recompletion	Reason(s) for filing (Check proper box)  Other (Please explain)				
Change of ownership   Casingheed Gas   Condensate	Change in well name & ownership				
Amoco Production Company, Box 68, Hobbs, New Mexico 88240  II. DESCRIPTION OF WELL AND LEASE Lease Name Amoco State S Com Unit Letter E 1980 Feet From The North Line and 660 Feet From The West Line of Section 32 Township 225 Range 38E NMPM, Lea County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Concensate Address (Give address to which approved copy of this form is to be sent)  Name of Authorized Transporter of Oil or Concensate Section Northern Natural Gas Co.  If well produces oil or liquids, Unit Sec. Twp. Rige. Is gas actually connected?  When this production is commingled with that from any other lease or pool. give commingling order number:  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 completed with and that the information given is true and complete to the best of my knowledge and better.  OIL CONSERVATION DIVISION  APPROVED IN The form the veil in accordance with MULE 11194.  All this is a request for allowable for a cavely drilled or despended well, this is a mequate for allowable for a cavely drilled or despended well, this form must be filled out completely for allowable for more well in accordance with MULE 11194.  Application of this form must be filled out completely for allowable for more wall in accordance with MULE 11194.  Fill out only Section of this form must be filled out completely for allowable for more wall for more wall for each pool in multiply leads on the well in accordance with MULE 11194.  Separate Forms C-104 must be filled for each pool in multiply leads and the complete for each pool in multiply leads and the complete for each pool in multiply leads and the complete for each pool in multiply leads and the complete for each pool in multiply leads and the complete for each pool in multiply	Hecompletion Heromoteria				
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