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STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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| **. ** (***** *** | 4114 | <u>i </u> | |
| DISTRIBUTIO | D NI | | |
| SANTA FE | | | |
| FILE | | | |
| U.4.0.E. | | | |
| LAND OFFICE | | | |
| TRANSPORTER | OIL | | |
| | DAB | | |
| OFERATOR | | | |
| PROBATION OFFICE | | | |

P. O. BOX 2088 DEN 0 6

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS | | | |
|--|---|--|--|
| I. | | | |
| Operator | | | |
| Merrion Oil & Gas Corp. | | | |
| Address | | | |
| P. O. Box 840, Farmington, New Mexico 87499 Other (Please explain) | | | |
| Reason(s) for fitting (United proper con) | | | |
| New Well Change in Transporter of: | Change of Operator | | |
| The completion | Change of Operator | | |
| Change in Ownership Casinghead Gas Cor | | | |
| If change of ownership give name manage of a Transport EF Cortes Colorado 81321 | | | |
| If change of ownership give name Texaco Oil, Inc., Box EE, Cortez, Colorado 81321 | | | |
| TO DESCRIPTION OF WELL AND LEACE | | | |
| II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Fo | rmation Kind of Lease Lease No. | | |
| | State, Federal or Fee Nav. Allot NOOC-14 | | |
| Navajo Allotted 15 4 Papers Wash Entrada Nav. Allott Nill - 14 Leceillen 20-5377 | | | |
| I 2210 South the god 990 Feet From The West | | | |
| Unit Letter Li : 2310 Feet From The South Cities and 320 | | | |
| Line of Section 15 Township 19N Range | 05W NMPM, McKinley County | | |
| · | | | |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | | | |
| Name of Authorized Transporter of CII or Condensate Address (Give address to which approved copy of this form is to be sent) | | | |
| | | | |
| Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) | | | |
| | 100 | | |
| If well produces oil or liquids, Unit Sec. Twp. Rge. | is gas actually connected? When | | |
| give location of tanks. | | | |
| 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. BY Stank BY | | | |
| SUPERVISOR DISTRICT TO THE SUPERVISOR DISTRICT T | | | |
| , | TITLE | | |
| (1 My 2 d/2011 + 200) | This form is to be filed in compliance with RULE 1104. | | |
| If this is a request for allowable for a newly drilled or deepened | | | |
| T. Greg Merrion (Signature) | well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with nULE 111. | | |
| Production Engineer | All sections of this form must be filled out completely for allow- | | |
| (Title) | able on new and recompleted wells. | | |
| 12/28/87 | 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. | | |
| (Date) Well name or number, or transported of the such change of cardinal Separate Forms C-104 must be filed for each pool in multiple | | | |
| completed wells. | | | |