STATE OF NEW MEXICO : EMERGY AND PUBLISHALS OFPARTMENT

11 '85

(Vale)

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PROBATION OFFICE	!
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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 Page 1

Fiff out only Sections I. II. III, and VI for changes of condition, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each post in multiply

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PRODUCTION	AUTHORI	ZATION TO T	ANL RANSPO	RT OIL AND NATU	RAL GAS		
Operator							
Merrion Oil & Gas	Corporation						
P. O. Pox 840, Fa	rmington, New	w Mexico	87499		m ege	WEM .	
Recson(s) for liling (Check proper	or/			Other (Please	explain) M		
New Wall	Change in	Transporter of:			UN	10.05	
flecompletton	K ou		Dry (Gas	MAY 21	1303	
Change in Conership	Cretin	ghead Gas	Cond	lensote	and the second of	1 1543/	
					OIL CON	\	
f change of ownership give name and address of previous owner	•				DIST	, 3	
I. DESCRIPTION OF WELL &	AND TEASE						
Lease Name	Well No. Pool Name, Including Fo		uding Form	ndtion	Kind of Lease	Lease No.	
_	8			llup Dakota	State, Federal or Fee Jica	rilla Cont. 360	
Bonanza Location		west min		LITTI DAKOLA			
	1850 Feet From	The Sout	h_Line	and 1850	_ Feet From The West		
Line of Section 2	Township 22	N Rom	nge :	3W , NMPM	. Sandoval	County	
III. DESIGNATION OF TRAN			TURAL (GAS	to which approved copy of this j	(00-1110-1111	
Name of Authorized Transporter of	CII [X] or Co	ndensate [Address (Give address	to which approved topy of this f	orm is to be senty	
The Mancos Corpora	tion			P. O. Box 1320). Farmington, Hew M	exico 87499	
Name of Authorized Transporter of	Casinghead Gas 🔯	or Dry Gas (□ <i>'</i>	Address (Give address	to which approved copy of this	orm is to be sent;	
El Paso Natural Gas Co.				P. O. Box 4289, Farmington, New Mexico 87499			
If well produces oil or liquids,	Unit Sec.			s que octually connect	•		
give location of tanks.	K 1 2	22N	3W	Yes	9/82		
f this production is commingled	with that from any	other lease o	r pool, gi	ve commingling orde	r number:		
NOTE: Complete Parts IV an	d V on reverse si	de if necessar	у.				
The second secon				OIL CONSERVATION DIVISION			
VI. CERTIFICATE OF COMPI	IANCE		11.		MAY 24	(198 5	
hereby certify that the tules and regu	lations of the Oil Co	nservation Divisio	on have	APPROVED		, 19	
seen complied with and that the inform	nation given is true an	d complete to the	best of		801/10/		
ny knowledge and belief.			- 11	BY	- JAMA - CO	(* 	
,		,	- 1	TITLE	CUDERVISO	R DISTRICT 48 8	
/ / / /	<i>(</i>)		fi .				
1 1/m_ 1	. n l-	No. of the Assessment of the State of the St	- 1		be filed in compliance wit		
1	(gnatwe)				uest for allowable for a new t be accompanied by a tabul		
	•	a con		tests taken on the	well in accordance with AU	LE 111.	
Stern S. Dunn, Operations Manager (Tide)				All sections of this form must be filled out completely for allow-			
			11	able on new and recompleted wells.			

completed wells.