

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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SANTA FE		
FILE		
U.S.G.A.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

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

Form C-104
Revised 10-1-78
RECEIVED
NOV 01 1986

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OIL CON. DIV.
DIST. 3

I.

Operator
Meridian Oil Inc.

Address
P. O. Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input checked="" type="checkbox"/> Change in Ownership/Operatorship			

Other (Please explain)
Meridian Oil Inc. is Operator for El Paso Production Company

If change of ownership give name and address of previous owner: El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

Lease Name: Jicarilla A

Well No.: 1

Pool Name, including Formation: Ballard
Wildcat Pictured Cliffs

Kind of Lease: Jic Cont 36

Location: E 1700 North 800 West

Unit Letter: 21

Feet From The: 24N Line and 5W

Feet From The: Rio Arriba

Line of Section: Township: Range: NMPM: County:

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS


Name of Authorized Transporter of Oil or Condensate: Meridian Oil Inc.	Address (Give address to which approved copy of this form is to be sent): P. O. Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas or Dry Gas: El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent): P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks: Unit: 21, Sec: 24N, Range: 5W	Is gas actually connected? when:

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

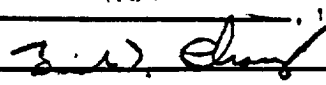
NOTE: Complete Parts IV and V on reverse side if necessary.

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.


(Signature)
Drilling Clerk
(Title)
11-1-86
(Date)

OIL CONSERVATION DIVISION
NOV 01 1986

APPROVED _____, 19
BY 
TITLE SUPERVISION DISTRICT # 3

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