

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	<input type="checkbox"/> OIL <input type="checkbox"/> GAS
OPERATOR	
PRODUCTION OFFICE	

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Revised 10-01-78  
Sept. 06, 1985  
**RECEIVED**  
SEP 09 1985  
OIL CON. DIV.  
DIST. 3

I. Operator  
MERIDIAN OIL INC.

Address  
P. O. BOX 4289; FARMINGTON, NEW MEXICO 87499

Reason(s) for filing (Check proper box)  
☐ New Well  
☐ Recompletion  
☒ Change in ~~Operatorship~~ Operatorship  
Change in Transporter of:  
☐ Oil  
☐ Dry Gas  
☐ Condensate  
☐ Casinghead Gas

Other (Please explain)  
Meridian Oil Inc. is an agent for Meridian Oil Production Inc.

If change of ~~operatorship~~ operatorship El Paso Exploration Company whose name changed, as of 4-10-85, and address of previous owner to Meridian Oil Production Inc.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Little Federal #32	Well No. #2	Pool Name, including Formation W. Lindrith Gallup Dakota	Kind of Lease Federal State, Federal or Fee NM	Lease No. 28715
Location Unit Letter <u>0</u> <u>790</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>East</u> Line of Section <u>32</u> Township <u>T24N</u> Range <u>R3W</u> , NMPM, <u>Rio Arriba</u> <u>Sandoval</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, N.M. 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4289, Farmington, N.M. 87499
If well produces oil or liquids, give location of tanks. Unit <u>0</u> Sec. <u>32</u> Twp. <u>24N</u> Rge. <u>3W</u>	Is gas actually connected? <input type="checkbox"/> 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.

James R. Permenter  
JAMES R. PERMENTER (Signature)  
ATTORNEY-IN-FACT  
(Title)  
APRIL 10, 1985  
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 09 1985, 19\_\_\_\_  
BY Supervisor  
TITLE SUPERVISOR 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.