

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL GAS
OPERATOR	
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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

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SEP 09 1985

OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator MERIDIAN OIL INC.

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

Reason(s) for filing (Check proper box)

☐ New Well ☐ Change in Transporter of: ☐ Oil ☐ Dry Gas ☐ Condensate

☐ Recompletion ☐ Casinghead Gas

☒ Change in Operatorship Other (Please explain) Meridian Oil Inc. is an agent for Meridian Oil Production Inc.

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Arco Little Federal 29</u>	Well No. <u>#2</u>	Pool Name, including Formation <u>West Lindrith Gallup Dakota</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>NM28713</u>
Location Unit Letter <u>H</u> <u>1850</u> Feet From The <u>North</u> Line and <u>790</u> Feet From The <u>East</u>				
Line of Section <u>29</u> Township <u>T24N</u> Range <u>R3W</u> , NMPM, <u>Rio Arriba</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"/> <u>Giant Refining Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 256, Farmington, NM 87499</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <u>El Paso Natural Gas Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 4289, Farmington, NM 87499</u>
If well produces oil or liquids, give location of tanks.	Unit <u>H</u> Sec. <u>29</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
BY Frank J. Cawley
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.