## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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U.1.0.4.			
LAND OFFICE			
THANSPORTER	OIL		
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OFERATOR			
PROMATION OFFICE			

## 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

TRANSPORTER OIL REQUEST FOR	•		
	ORT OIL AND NATURAL GAS		
I	<u> । । । । । । । । । । । । । । । । । । ।</u>		
Operator			
Merrion Oil & Gas Corp.			
P. O. Box 840, Farmington, New Mexico 874	99		
Reason(s) for liling (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:			
Recompletion X OII Dry	Ga.		
Change in Ownership Casinghead Gas Cor	ndenzate		
If change of ownership give name and address of previous owner			
and sudiess of previous and			
II. DESCRIPTION OF WELL AND LEASE	realion   Kind of Lease   Lease No.		
Lease Name			
Canyon Largo Unit 298 Devils Fork Ga	Trup Tederal groves		
Location	700 Fast		
Unit Letter A : 790 Feet From The NOrth Line	read 790 Feet From The East		
2411	6W NMPM, Rio Arriba County		
Line of Section 3 Township 24N Range	On James, INTO THE LOCAL		
A TO THE PROPERTY OF AN AND MATTER AT	CAS		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Address (Give address to which approved copy of this form is to be sent)			
Name of Authorized Police of Oth	P O Box 1429, Bloomfield, NM 87413		
Conoco Transportation, Inc.	Accress (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Casinghead Gas or Dry Gas			
Unit Sec. Twp. Rec.	Is gas actually connected? When		
If well produces oil or liquids, A 3 24N 6W	Yes 4/81		
give location of tanks.	in allian order number:		
If this production is commingled with that from any other lesse or pool,	give comminging order nameer.		
NOTE: Complete Parts IV and V on reverse side if necessary.			
NOTE. Complete Fund I	OIL CONSERVATION DIVISION		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
!	APPROVED, 19		
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	BY		
my knowledge and belief	BY		
	TITLE \$35 164 22 DOLLAR DE CONTRACTOR		
ALT SIL			
The Alexander	This form is to be filed in compliance with MULE 1104.		
12 -1 22	If this is a request for allowable for a newly drilled or deepens well, this form must be accompanied by a tabulation of the deviation		
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completed wells.

Operations Manager

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tests taken on the well in accordance with AULE 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