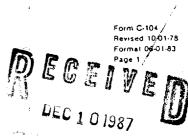
STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA FE		Ι	
FILE			
U.B.O.A.			
LAND OFFICE			
TAAHIPORTER	DIL		
	GAL		
OPERATOR			
PROMATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501



REQUEST FOR	ALLOWABLE		
REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS DIV.			
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
I	<u> </u>		
Operator			
Merrion Oil & Gas Corp.			
Address			
· ·			
P. O. Box 840, Farmington, New Mexico 87499			
Reason(s) for liling (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:			
Recompletion X Oil Dry	X Oil Dry Coa		
Change in Ownership Casinghead Gas Condensate			
Charles III Owner III	<u></u>		
If change of ownership give name			
and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Well No. Pool Name, including Fo			
Canyon Largo Unit 303 Devils Fork Ga	111up State, Federal or Fee Federal \$F-078874		
Location			
Unit Letter 0 : 790 Feet From The South Line and 1850 Feet From The East			
Line of Section 5 Township 24N Range	6W NEPM Rio Arriba County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
ame of Authorized Transporter of Cit To ar Condensate Address (Give address to which approved copy of this form is to be sent)			
$\frac{1}{2}$ p o $\frac{1}{2}$ 1420 Ploomfield NM 8/413			
Name of Authorized Transporter of Cosingheda Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)			
Unit Sec. Twp. Ree.	is gas actually connected? When		
If well produces oil or liquids, give location of tanks. 0 5 24N 6W	Yes 7.781		
If this production is commingled with that from any other lease or pool, give commingling order number:			
NOTE C. M. Pare W. and V. on caveres side if necessary			
NOTE: Complete Parts IV and V on reverse side if necessary.			
THE COLUMN AND ADDRESS OF COLUMN AND ADDRESS	OIL CONSERVATION DIVISION		
VI. CERTIFICATE OF COMPLIANCE			
I hereby certify that the tules and regulations of the Oil Conservation Division have APPROVED DEC 10 1887 . 19			
been complied with and that the information given is true and complete to the best of	A		
my knowledge and belief.			
,	***************************************		
Comment of the second	TITLE SUPERFORM DISTRICT #3		
41-7 1 1			
This form is to be filed in compliance with RULE 1			
	If this is a request for allowable for a newly drilled or deepened		
(Signature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.		
Operations Manager			
(Title)			
DEC 10 1987	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.		
(Date). Separate Forms C-104 must be filed for each pool in mu			
	completed wells.		
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