

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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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
RECEIVED
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**OIL CON. DIV.
DIST. 3**

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Merriam Oil & Gas Corporation
Address
P. O. Box 840, Farmington, New Mexico 87499
Reason(s) for request (Check proper box)
☐ New Well ☐ Change in Transporter of:
☐ Recompleting ☐ Oil
☐ Change in Ownership ☐ Casinghead Gas ☐ Dry Gas
☐ Change of Operator ☐ Condensate
If change of name and address of previous owner
El Paso Natural Gas Co., P. O. Box 4289, Farmington, New Mexico

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Canyon	Well No.	356	Pool No.	Devi	Including Formation	Fork Gallup	Kind of Lease	State, Federal	Lease No.	Federal SF 078882
Location	Unit Letter	P	910	Feet From The	Line and	860	Feet From The	East			
Line of Sec	20	Township	25N	Range	6W						

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

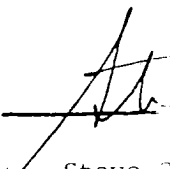
Name of Authorizing Transporter of Oil <input checked="" type="checkbox"/> or Condensate	The Merriam Corporation	Name of Authorizing Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas	El Paso Natural Gas Co.
If well produces gas or liquids	Unit	Sec.	Tw
	P	20	2
Range	6W	Is gas actually connected?	When

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

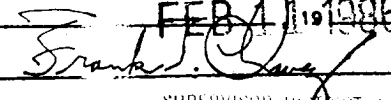
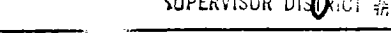
NOTE: Complete Parts IV and V on reverse side if necessary.

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.


Steve P. Dunn, Operations Manager
(Title)
10 85
(Date)

OIL CONSERVATION DIVISION

APPROVED  FEB 11 1986
BY 
SUPERVISOR DISTRICT #3
TITLE

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.