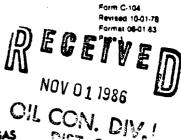
## STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

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LAMO OFFICE			
TRANSPORTER	014		
	GAS		
OPERATOR			
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## OIL CONSERVATION DIVISION P. O BOX 2088

SANTA FE. NEW MEXICO 87501



REQUEST FOR ALLOWABLE

I. AUTHORIZATION TO TRANSI	PORT OIL AND NATURAL GAS			
Meridian Oil Inc.				
P. O. Box 4289, Farmington, NM 87499				
Rosson(s) for filing (Check proper box)  Other (Please explain)				
New Well Change in Transporter of:	Meridian Oil Inc. is Operator			
Recompletion Oil Or	for El Paso Production Company			
X Change INCHANNIOPERATORShip Connected Ges Co	ondensate -			
If change of ownership give name El Paso Natural Gas Compa	iny, P. O. Box 4289, Farmington, NM 87499			
II. DESCRIPTION OF WELL AND LEASE				
Local Name   Well No. Pool Name, including Fo	ormation Kind of Lease Lease No.			
Lindrith Unit 40 So Blanco Pic	Store, Foderel or Foe			
Location 1100	, , , , , , , , , , , , , , , , , , , ,			
Unit Letter M : 1110 Feet From The South Lin	e and 840 Feet From The West			
Line of Section 10 Township 24N Range	3W , NMPM, Rio Arriba County			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	, GAS			
Name of Authorized Transporter of Cit or Condensate	Agazess (Give address to which approved copy of this form is to be sent)			
Meridian Oil Inc.	P. O. Box 4289, Farmington, NM 87499			
Name of Authorized Transporter of Casinghead Gas are or Dry Gas 🛣	Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499			
If well produces oil or liquids. Unit   Sec. Twp.   Rgs.	Is gas detudily connected? When			
give location of tants. M 10 24N 3W				
If this production is commingled with that from any other lesse or pool,	give commingling order number:			
NOTE: Complete Parts IV and V on reverse side if necessary.				
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION			
	NOV 0 1 1986			
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	APPROVED (1000), 19			
my knowledge and belief.	3.1) d			
	TITLE SUPERVISION DISTRICT # 3			
	This form is to be filed in compliance with RULE 1104.			
Jegger Loak	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			
Drilling Clerk	tests taken on the well in accordance with Aug 111.			
(Tule)	All sections of this form must be filled out completely for allowable on new and recompleted wells.			
11-1-86	Fill out only Sections I. II. III. and VI for changes of owner,			
(Dese)	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.			