

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PRODUCTION 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

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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, NM 87499

Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☒ Change in ~~Ownership~~ Operatorship
Change in Transporter of:
☐ Oil
☐ Gas
☐ Condensate
☐ Dry Gas
☐ Other (Please explain)
Meridian Oil Inc. is Operator for El Paso Production Company

If change of ownership give name and address of previous owner
El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

Lease Name
Canyon Largo Unit

Well No.
48

Pool Name, including Formation
Ballard
Large Canyon Pictured Cliffs

Kind of Lease
State, Federal or Fee

Lease No.
SF 078875

Location
D 990 North 990 West
Unit Letter : Feet From The Line and Feet From The
33 25N 6W Rio Arriba
Line of Section Township Range NMPM, County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒
Meridian Oil Inc.

Name of Authorized Transporter of Gas ☐ or Dry Gas ☒
El Paso Natural Gas Company

Address (Give address to which approved copy of this form is to be sent)
P. O. Box 4289, Farmington, NM 87499

Address (Give address to which approved copy of this form is to be sent)
P. O. Box 4289, Farmington, NM 87499

If well produces oil or liquids, give location of tanks.
Unit D Sec 33 Twp 25N Rge 6W

Is gas actually connected? 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.

(Signature)
Drilling Clerk
(Title)
11-1-86
(Date)

OIL CONSERVATION DIVISION

NOV 01 1986

APPROVED _____
BY W. D. Smith
TITLE SUPERVISION 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.