## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	E1740	T.,	
DISTRIBUTION		П	
SANTA PE		$\Gamma$	
FILE			
U.1.G.4.			
LAMO OFFICE			
TRANSPORTER	OIL		
	948		
OPERATOR			
PROBATION OFFICE			

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83

	UEST FOR ALLOW AND			NOV 01 1986	
PROBATION OFFICE AUTHORIZATION TO	) TRANSPORT OIL	AND NATU	RAL GAS O/L	CON S.	_
Operater Meridian Oil Inc.				DIST. 3	•/
Address			<del></del>		
P. O. Box 4289, Farmington, NM 87499				14	
Roosen(s) for filing (Check proper box)		Other (Please	espiein)		
	Change in Transporter of: Meridian Oil Inc. is Operator				
Recompletion OII	Dry Ges	for El	Paso Produc	tion Company	
X Change in Childel Compensatorship Casingheed Gas	Condensate				
If change of ownership give name El Paso Natural Gas	Company, P.	0. Box 42	289, Farming	gton, NM 8749	99
II. DESCRIPTION OF WELL AND LEASE Ballon	$\ell$				
Canyon Largo Unit  Well No. Pool Name, In Largo	anyon Picture	d Cliffel	Kind of Lease State, Federal or I	SF 0788	75 Ledes No.
Location D 965 Nor	th 9	90		West	•
Unit Letter;Feet From The	Line and		_ Feet From The _		
30 25N	6W	. NM <b>PM.</b>	Rio	Arriba	Caunty
Meridian Oil Inc.  Name of Authorized Transporter of Cit  or Condensate  or Condensate  or Condensate  or Condensate  or Condensate  or Condensate  or City  or Condensate  or City  or Condensate  or City  or Ci	P. O.	Box 4289	Farmingto	n. NM 87499 copy of this form is to con, NM 87499	
If well produces oil or liquids.  Unit Sec. 25N give location of tanks.	Roe Is gas det	ratty connected	17 , When	<sup>१९</sup> ० विस्तितिक्षसम्बद्धाः	भूमा ि
If this production is commingled with that from any other lesse	or pool, give comm	ingling order	number:		
NOTE: Complete Parts IV and V on reverse side if necessi	ary.		<del></del>		
VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION SOLVED 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 pest of		)VED	7	7 0 1 1000	19
my knowledge and belief.	BY	•		- Charles	
	TITLE		SUPERVIS	ION DISTRICT	# 3
the state of the s	יעד	is form is to	be filed in comp	liance with RULE	1104.
(Signature) Drilling Clerk	well, th	its form must	be accompanied	for a newly drilled by a tabulation of se with AULE 111.	the deviation
(Title)			his form must be empleted wells.	filled out complet	ely for allow
11-1-86	Fit	lout only Se	etions I. II. III.	, and VI for chang	
(Date)	11			rother such change filed for each poo	
		ed wells.	- 144 WARE AL	900	