STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA PE		Γ	
PILE			
V.1.0.1,			
LAND OFFICE			
TRANSPORTER	OIL		
	BAD		
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 Page 1

REQUEST FOR ALLOWABLE

AND
ALITHOPIZATION TO TRANSPORT OIL AND NATURAL GAS

T-nonarion orreg	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
Coperator				
			•	
Meridian Oil Inc.				,
1	NM 07400			
P. O. Box 4289, Farmi Reason(s) for filing (Check proper box)	ngton, NM 8/499	Other (Please es	ale is 1	
l manage	Change in Termenesian of	l ' '	•	
New Well	Change in Transporter of:			is an agent
Recompletion		indensate IOT Mer	idian Oil	Production Inc.
X Change in Assessment Operator	S[h] Basindheda Gas			
If change of ownership give name	1 Paso Farolo	ration Co.		
and address of previous owner	e- 1 4 - 0 R A fai	101100 00:	i. • • • • •	
II. DESCRIPTION OF WELL AND L	FASE			
Lease Name	Well No. Pool Name, Including Fo	ormation K	ind of Lease	Lease No.
Jicarilla 117E	3 Tapacito Pic	tured Cliffs st	ate (Federal or Fee	Jic. Cont. #117
Location	<u> </u>	·		
N 1000	Feet From The South Lin	1650	Feet From The	West
Unit Letter N : 1090	_ Feet From TheLin	and 1000		
Line of Section 34 Townsh.	ip 26N Range	3W , NMPM,	Rio Ar	riha County
Line of Section 5 1 1000000	J J J J J J J J J J J J J J J J J J J			
III. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL	. GAS	•	
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to t	uhich approved copy	of this form is to be sent)
Meridian Oil Inc.		P O Box 42	89 Farmin	gton NM 87499
Name of Authorized Transporter of Casingh	nead Gas or Dry Gas 🕅	Address (Give address to	which approved copy	of this form is to be sent)
Northwest Pipeline Co		P. O. Box 890	0. Salt La	ke City UT 8411
Un		Is gas actually connected?		
If well produces oil or liquids, give location of tanks.	N : 34 26N; 3W		I	
If this production is commingled with th		give commingling order n	umber:	
		g.ve committee and a		
NOTE: Complete Parts IV and V or	n reverse side if necessary.			
	_	ון חוו כחו	NSERVATION C	IVISION
VI. CERTIFICATE OF COMPLIANCE	E	0,5 00,	ISENVATION L	"NOV 1_0 1986
I hereby certify that the rules and regulations of	of the Oil Conservation Division have	APPROVED		1101 1000
been complied with and that the information gi	ven is true and complete to the best of			
my knowledge and beiief.		BY	S,000	2 /m 2/
		TITLE	SUPERVISOR	DISTRICT # 3
1 Acces (. /	4	e filed in complie	
If this is a request for allowable for a newly drilled or do well, this form must be accompanied by a tabulation of the de				
tests taken on the well in accordance with BULE 111.				
Drilling Clerk All sections of this form must be filled out completely for all				
# #DIS ON USA SUG TOCOMPLETOR WELL.				
11-7-86 (Date)		Fill out only Sec	tions I, II, III, a r transporten or ot	nd VI for changes of owner, her such change of condition.
Separate Forms C-104 must be file				
		completed wells.		