

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF WELLS OPERATED	
PERMIT NO.	
DATE	
WELL NO.	
WELL NAME	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
CONTRACT NO.	

OIL CONSERVATION DIVISION

P. O. BOX 2028

SANTA FE, NEW MEXICO 87501

Form O-104
Revised 10-3-79
Form O-104
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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NOV 01 1985

OIL CON. DIV.
NOV 01 1985

I. Operator
Meridian Oil Inc.

Address
P. O. Box 4289, Farmington, NM 87499

Reason(s) for filing (check proper box)
☐ New Well
☐ Production Change
☒ Change in Transportation Operatorship
☐ Change in Transportation Oil
☐ Oil
☐ Gas
☐ Dry Gas
☐ Conventional

Owner (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	Well No.	Well Name, including Formation	Kind of Lease	Lease No.				
Johnston A Com B	6	So. Blanco Pictured Cliffs	State, Federal or Fee	E-291-35				
Location								
Unit Letter	E	1500 Feet from The North Line and 890 Feet from The West						
Line of Section	36	Township	26N	Range	6W	NMPM	Rio Arriba	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	or Condensate	Address (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 Gas or Dry Gas	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, give location of lease.	Unit	Sec.	Twp.	Range	Is gas actually connected?
	E	36	26N	6W	

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.

John D. Oak
(Signature)
Drilling Clerk
(Title)
11-1-85
(Date)

OIL CONSERVATION DIVISION

NOV 01 1985

APPROVED

BY

John D. Oak

TITLE

SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with rules 1004.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the estimated costs based on the well in accordance with rules 1005.

All sections of this form must be filled out completely for new wells on new and recompleted wells.

Fill out only Sections I, II, III, and IV for changes of owner, well name or number, or transporter or other such change in operation.

Separate Forms O-104 must be filed for each pool in multiply completed wells.