

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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	GAS
OPERATOR	
PRODUCTION OFFICE	

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

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SEP 09 1985  
OIL CON. DIV.  
DIST.

I.

Operator MERIDIAN OIL INC.	
Address P. O. BOX 4289; FARMINGTON, NEW MEXICO 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in <del>Ownership</del> Operatorship	Meridian Oil Inc. is an agent for Meridian Oil Production Inc.
Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	

If change of ~~ownership~~ operatorship give name and address of previous owner El Paso Exploration Company whose name changed, as of 4-10-85, to Meridian Oil Production Inc.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla 119 N	Well No. #6	Pool Name, including Formation Tapacito Pictured Cliffs	Kind of Lease Federal State, Federal or Fee	Lease No. Jic. Cont #119
Location Unit Letter A 1100 Feet From The North Line and 870 Feet From The East Line of Section 7 Township T26N Range R4W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS


Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> None - No Production Tanks	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 90, Farmington, NM 87499					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When

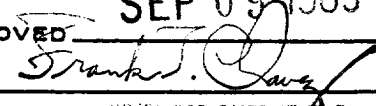
If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

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.

  
JAMES R. PERMENTER (Signature)  
ATTORNEY-IN-FACT (Title)  
APRIL 10, 1985 (Date)

OIL CONSERVATION DIVISION  
SEP 09 1985  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY   
SUPERVISOR DISTRICT #3  
TITLE \_\_\_\_\_

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.